



AGENDA FOR MAY 20TH, 2026
CITY OF BALDWIN REGULAR MEETING
7:00 p.m.
(Revised 5/15/2026)

7:00 p.m. Call to Order

- a. Pledge of Allegiance
- b. Additions/Corrections to Agenda
- c. Approval of Regular Meeting Agenda With/Without Additions/Corrections

Treasurer's Report:

Public Comment Requests:

Approval of Consent Agenda (*Items on Consent Agenda are reviewed in total by the City Council and may be approved through one motion. Any item on the Consent Agenda may be removed by any of the City Council Members for separate consideration.*)

- Approve Ordinance 2026-06; Amending Ordinance 800 Establishing Charges for Emergency Response Services
- Approve Escrow Credit Return of \$319.00 for VanSlyke Administrative Subdivision
- Approve Newspaper Insert for June – July 2026
- Approve Clerk Vacation Leave of May 22nd, 2026
- Approve Deputy Clerk Vacation Leave of June 1st – June 5th, 2026
- Approve New Hire Fire Fighters; Ryan Schuft, Danielle Bergmann, Nicole Wolfe and Brian Hockemeyer
- Approve City Council Meeting Minutes of May 6th, 2026
- Approve Emergency City Council Meeting Minutes of May 14th, 2026

Engineering:

- a. Discuss/Approve/Disapprove Construction Plans for the Sandy Lake and Lake Diann Improvements, Request for Quotes, and Sandy Lake Temporary Construction Easements
- b. Discuss/Approve/Disapprove Resolution 26-15 City Acceptance of Hardy Homestead Development
- c. Discuss/Approve/Disapprove Invoice from West Branch Construction for the 278th Avenue Culvert Grading Project
- d. Discuss Progress on the 2026 Street Reconstruction Project

Disclaimer: This agenda has been prepared to provide information regarding an upcoming meeting of the Baldwin City Council. This document does not claim to be complete and is subject to change. A quorum of the Baldwin City Council must be present. Five Copies of the agenda and one copy of the packet materials are available for review by the public. The meeting will be video and audio recorded for transcription purposes only.

Frontier Trails Update:

- a. Discuss/Approve/Disapprove Quote from NSU for Telemetry Units

Road Report – Alan Walker

- a. Discuss Public Works Report
- b. Discuss/Approve/Disapprove Cell Phone for New Hire Public Works Maintenance Technician
- c. Discuss Chip, Crack Sealing and Micro Surfacing for 2026
- d. Discuss Access Date on Driveway Permit Applications – Tom Rush
- e. Discuss Culvert Concerns
- f. Discuss/Approve/Disapprove 127th Avenue Cul De Sac Repair
- g. Discuss/Approve/Disapprove Exhibit A for Resolution 26-04
- h. Discuss/Approve/Disapprove Gravel Road Grading Expenditure up to \$1000.00 – Tom Rush and Alan Walker
- i. Discuss/Approve/Disapprove Public Works Supervisor Attending SWCD Tour on June 18th, 2026 – Tom Rush

Tabled Items:

- a. Discuss/Approve/Disapprove Changing Administrative Citation Civil Fine Amount to \$200.00 – Tom Rush

New Business:

- a. Discuss/Approve/Disapprove 5 Year Contract for Assessing Services – Jay Swanson
- b. Discuss/Approve/Disapprove Initiating Subdivision Zoning Ordinance Amendment for Generational Housing – Jeff Holm
- c. Discuss/Approve/Disapprove Health Insurance Renewal for Employees – Jay Swanson
- d. Discuss Elections for Fire Chief – Tom Rush
- e. Reschedule Employee Reviews – Jay Swanson
- f. Discuss/Approve/Disapprove Planning Commission Resignation for Commissioner Abby Newland effective May 27, 2026 - Jay Swanson
- g. Discuss/Approve/Disapprove Updated Resignation for Fire Chief - Tom Rush
- h. Discuss/Approve/Disapprove Old National CD Options - Scott Case

Announcements

- a. Park Committee Meeting Thursday, May 21st, 2026 at 7:00 p.m.
- b. City Hall Closed Monday, May 25th, 2026 in Observance of Memorial Day.
- c. Planning Commission Meeting Wednesday, May 27th, 2026 at 7:00 p.m.
- d. Next City Council Meeting Wednesday, June 3rd, 2026 at 7:00 p.m.

Any Other Business:**Approve Bill for Payment:****Adjourn:**

ORDINANCE 2026-06

CITY OF BALDWIN
SHERBURNE COUNTY, MINNESOTA

The Baldwin City Council hereby ordains:

Section 1. The following schedule of fees established by Ordinance 800, Exhibit A is hereby amended to read as follows:

Firefighters	\$ 15 20/hour per firefighter
Pool Filling:	\$ 105 150 per load for chlorinated water
	\$ 75 100 per load for well water

Section 2. Effective Date. This Ordinance shall become effective after passage and publication.

Section 3. Repealer. Any portion of any prior ordinance that conflicts with this ordinance is hereby repealed and replaced by this ordinance.

(remainder of page intentionally blank signatures follow)

ADOPTED by the Baldwin City Council this 20th day of May, 2026.

MOTION BY:
SECONDED BY:
IN FAVOR:
OPPOSED:

CITY OF BALDWIN

Jay Swanson, Mayor

ATTEST:

Joan Heinen, City Clerk/Treasurer

VANSLYKE ADMIN SUBDIV.

Escrow Receipts		Amount	Check#	Date		
R-800-34000	Charges for Services	\$ 200.00	10103	2/17/2026		
R-800-36205	Escrow	\$ 800.00	10103	2/17/2026		
R-800-34104	Plan Checking Fee					
Payments						
E-800-41600-304	Legal					
E-800-43100-303	Engineering					
E-800-41910-300	The Planning Company	\$ (290.00)		3/6/2026		
		\$ (145.00)		4/7/2026		
E-800-41120-351	Legal Ads/ECM					
E 800-34102-356	Sherburne Co Recording	\$ (46.00)		3/9/2026		
	TOTAL	\$ 319.00				
Escrow to Return						
E-800-43100-810	Refund					



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BALDWIN CITY COUNCIL REGULAR MEETING

MAY 6TH, 2026

Present – Acting Mayor; Tom Rush, City Council Members; Alan Walker, Scott Case, and Jeff Holm

Absent – Mayor Jay Swanson

Also Present – City Planning & Zoning Administrator; Dan Licht from The Planning Company (TPC)

Call to Order – The May 6th, 2026 regular meeting of the City of Baldwin was called to order by Acting Mayor Tom Rush at 7:00 p.m.

Pledge of Allegiance – All present recited the Pledge of Allegiance

Prayer Request from Delmas Hines

Additions/Corrections to Agenda

Approval of Regular Meeting Agenda With/Without Additions/Corrections - Walker/Case unanimous to approve as amended.

May 2026 Preliminary Treasurer's Report – The Clerk/Treasurer reported a beginning balance of \$1,131,766.40, receipts of \$16,808.90, disbursements of \$32,576.23 leaving an unaudited ending balance of \$1,115,999.07.

Sheriff's Report – Deputy Wilson reported a total of 255 calls for service in the City of Baldwin for the month of April 2026. These calls consisted of 1 motor vehicle theft, 5 motor vehicle accidents, 6 dog complaints, 15 medicals, 63 traffic stops and 38 additional patrols were performed. The rest of the calls were miscellaneous calls for service.

Fire Department Report – Rush read the Fire Department report for the month of April 2026. There were 30 calls for service which consisted of 22 medicals, 3 mutual aids, 1 motor vehicle, 2 grass/rubbish fires and 2 alarms. There were 9 calls in Blue Hill Township.

Discuss/Approve/Disapprove Applying for FEMA Grant – Case attended the Sherburne County Hazard Mitigation Meeting. This meeting communicated that there are grants available to upgrade the warning sirens, vegetation removal, rural development for infrastructure and backup power generators. FEMA's Hazard Mitigation Assistance programs provide grants to state, local, tribal and territorial governments to reduce and mitigate future natural disaster losses. The funding is used to complete diverse resilience activities and projects. **Walker/Rush unanimous to approve applying for FEMA Grant.**

Update on Senator Klobuchar's Grant – Case communicated that the grant has been submitted to the Senator Appropriations Committee for funding consideration. Submission of the application does not guarantee that funding will be awarded.

Public Comment Requests - None

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Approval of Consent Agenda – Case/Walker unanimous to approve Consent Agenda.

- Approve City Council Meeting Minutes for April 1st, 2026, and April 15th, 2026
- Approve Special City Council Meeting Minutes for April 13th, 2026
- Approve Local Board of Appeal Meeting & Equalization Minutes for April 16th, 2026
- Approve Termination of Seasonal Snowplow Drivers for 2025 to 2026 Season
- Approve One Day On-Sale Liquor License for Fire Department Dance on August 29th, 2026. Rush stated that the application fee of \$100.00 would be waived.
- Approve New Park Committee Member Mark Oleen
- Approve SWCD Tour of Practices of Sandy Lake Project on June 18th, 2026
- Approve Renewal of Tobacco License (July 1, 2026 – June 30, 2027) for Ridgewood Bay Resort
- Approve Ordinance 2026-05; An Ordinance Defining Nuisances, Prohibiting Their Creation or Maintenance and Providing for Abatement and Penalties for Violations
- Approve Clerk Vacation Leave of May 11th, 2026
- Approve Purchase of 20 EMS Signs for \$719.53 Plus Freight

Planning Items:

Discuss/Approve/Disapprove Resolution 26-14; Haugen Variance – Full Planning Report on file in the Clerks' Office or online at baldwinmn.gov under Government/Agenda/Minutes/Agenda Packet. **Walker/Case approved, Rush Disapproved, motion carried** to approve Resolution 26-14.

Discuss Code Enforcements:

PID# 01-00020-4100, Waste which is a public nuisance. The Planning Company (TPC) is requesting City Council approval to send step 1 enforcement letter.

PID# 01-00404-0640, Waste which is a Public Nuisance, Dwelling Occupancy of RV. The Planning Company (TPC) is requesting City Council approval to send step 1 enforcement letter.

PID# 01-00553-0305, Motorcycles/Track. The Planning Company (TPC) is requesting City Council approval to send step 1 enforcement letter. If the Council wishes, they can request a citation because this has been a complaint for a couple of years.

Case/Walker unanimous to approve sending a citation to PID# 01-00553-0305.

Case/Walker unanimous to approve above code enforcements for sending step 1 enforcement letters for PID# 01-00020-4100 and 01-00404-0640.



Discuss/Approve/Disapprove Changing Administrative Citation Civil Fine Amount – Rush is requesting to increase the Administrative Citation Civil Fine Amount. Case asked what the typical fine is for other cities. Licht stated that typically it is \$200.00. **Case/Walker unanimous to table** until the May 20th, 2026 City Council meeting when the City Attorney is in attendance.

Discuss Floor Plan for Remodel/Addition of City Hall, Fire Department and Public Works Building – Case recommends getting quotes for the floor plan drafted by Mayor Swanson so the Infrastructure Committee can proceed on making recommendations to the City Council. **Case/Walker unanimous to approve** going out for quotes using plans Mayor Swanson drafted up for the remodel/addition of City Hall, Fire Department and Public Works building.

Park Committee Report – The Park Committee is working on getting new Park Committee Members. On May 19th, 2026 the Fire Department will be at Young Park doing training. The ballfield is being used a lot this summer by PYSBA and the parking lot has been expanded to avoid cars being parked on County Road 38. The Committee is looking at a scoreboard sign but installing and trenching could be expensive.

Discuss/Approve/Disapprove Quote for Young Park Trail Signs of \$285.00 -
Case/Walker unanimous to approve Young Park Trail Signs of \$285.00.

Cemetery Update – Rush communicated that there were 3 burials in April of 2026.

Discuss/Approve/Disapprove Additions to Baldwin Cemetery – There is currently only 50 lots left at Baldwin Cemetery. Rush stated that adding to the cemetery is something to think about in the future. Rush also communicated that the markers are really buried in the ground at the cemetery. Rush is working with the Cemetery Sexton on rewriting the rules and regulations. **Case/Walker unanimous** to table until the June 3rd, 2026 City Council meeting.

Tabled Items:

Discuss Layout of New Cemetery Map – **Case/Walker unanimous to table** until the June 3rd, 2026 City Council meeting.

Discuss/Approve/Disapprove Quote for HVAC at Fronter Trails Water Treatment Plant – **Case/Walker unanimous to approve** Hilliard Heating quote for \$3200.00 and the electrical quote of \$700.00 from Bost Boys Electric for a total of \$3900.00.

New Business:

Discuss/Approve/Disapprove Re-Stripping of City Hall Parking Lot – Rush stated this is the same price as previously quoted 2-3 years ago. **Walker/Case unanimous to approve** quote for \$685.00.

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Schedule Employee Reviews – Case/Walker unanimous to approve June 8th, 2026 starting at 6:00 p.m.

Discuss/Approve/Disapprove Moving Employee Reviews to December – Case stated that this should be moved to December, so it coincides with the budget.

Walker/Rush unanimous to approve moving employee reviews to December of each year going forward.

Holm arrived at 7:43 p.m.

Discuss/Approve/Disapprove White Paper Stock Paper for Future Newspaper Publications for an Estimated Expenditure of \$278.00 – Holm/Walker unanimous to approve all future additions of the Baldwin Newspaper being on white paper stock with an expenditure of \$278.00 each addition.

Schedule Road Tour – Walker/Holm unanimous to approve May 18th, 2026 at 6:00 p.m.

Discuss/Approve/Disapprove Certificate of Deposit Pre-Renewal Notice – Case/Walker unanimous to approve moving \$137,554.91 interest and allocate to the appropriate funds. The City Council requested research into a higher interest rate on the \$1,000,000.00 investment.

Discuss/Approve/Disapprove Hiring Committees Recommendation for Public Works Maintenance Technician – Walker/Case unanimous to approve offering employment to the top applicant contingent on background and pre-employment testing. The new employee would start June 1st, 2026 at \$29.00 an hour.

Discuss/Approve/Disapprove Rifle Deer Hunting in the City of Baldwin – Holm made a motion to keep the regulations the same as Sherburne County. Holm recommends reviewing the deer hunting firearm regulation after the deer hunting season. Case has concerns of using rifles for deer hunting in the city. Walker recommends reviewing after a year. **Walker seconded the motion, Case disapproved, motion carried.**

Discuss/Approve/Disapprove Procedure for Hiring Fire Chief and Transition – The City Council discussed holding elections for the Fire Chief or going through the selection process. At the last City Council meeting, the City Attorney recommended not having elections. Rush stated his intentions are what's best for the Fire Department and if the Fire Department wants elections, that's the direction the City Council should go. Case stated he has always wanted what's best for the Fire Department and the department is close to his heart but also wants what's best for the future. The Fire Chief term should be longer due to the training period. Case went on to say that the Firefighters can be part of the hiring committee. Rush stated that when we became a city, we told the residents there would be minimal changes. Case has concerns that there is going to be a vote for a \$40,000 Fire Chief position. Walker said that elections at the Fire

Department have been held for many years. Holm stated that the Township went down this road in the past because there were appointments made in the past and the Town Board went back to elections. Holm stated that morale would drop if elections weren't held and he is not ready to move to appointments at this time. The recommendation would be to have an interim Fire Chief. The current term for the Fire Chief is up December of 2026. **Holm made a motion** to remain with elections for the Fire Chief and Assistant Fire Chief position at the Fire Department. **Walker seconded the motion, Case disapproved, motion carried** to remain with elections for the Fire Chief and Assistant Fire Chief.

Discuss/Approve/Disapprove Revisiting Municipal Liquor Store Feasibility Testing – Holm made a motion to disapprove revisiting the Municipal Liquor Store Feasibility Study, **Walker seconded the motion, Case approved, motion carried to disapprove** revisiting the Municipal Liquor Store Feasibility Study.

Discuss/Approve/Disapprove Updating Exhibit A in Ordinance 800 – Holm made a motion for city staff to draft ordinance and have at the May 20th, 2026 City Council meeting and be placed on the consent agenda, **Walker seconded the motion, motion carried.**

Discuss/Approve/Disapprove Public Works Pay Increase – Rush is requesting a market adjustment for Public Works Employees of 15%. The Public Works Supervisor would be increased to \$36.82 an hour and Public Works Technician would be increased to \$31.91. The Clerk does not recommend the market adjustment because this adjustment was not budgeted for in 2025. Rush stated the budget for the Municipal Liquor Store Feasibility Study and Public Works Director should be used for this increase. **Holm/Walker unanimous to approve** 15% market increase for the current Public Works Department, **Case disapproved, motion carried.** This is a market adjustment and would start May 11th, 2026.

Announcements:

- a. ISD# 477 Special Election Tuesday, May 12th, 2026, Voting is from 7:00 a.m. to 8:00 p.m.
- b. Special Planning Commission Meeting Wednesday, May 13th, 2026 at 7:00 p.m.
- c. Fire Department Training at Young Park Tuesday, May 19th, 2026 from 5:00 p.m. to 9:30 p.m.
- d. Next City Council Meeting Wednesday, May 20th, 2026 at 7:00 p.m.

Any Other Business – **Case/Holm unanimous to approve** a total of \$1200.00 donation for Princeton Football Booster club for participating at Baldwin Clean-Up Day. There was a check for \$600.00 signed at tonight's meeting and an additional check for \$600.00 will be signed at the May 20th, 2026 City Council meeting.

Approve Bills for Payment – **Walker/Rush unanimous to approve** check number 29454 – 29493 for \$37,753.37 and 10 EFT Payments for \$10,962.29 for a total of \$48,715.66.

Adjourn – Holm/Walker unanimous to adjourn at 8:54 p.m.

Submitted By: (s/) Joan Heinen
Clerk/Treasurer
City of Baldwin

Approved By: (s/) Jay Swanson
Mayor
City of Baldwin

Date

Attendees: Matt Haugen, Delmas Hines, Bruce West, Michelle Cole, Paul & Kathie Miezwa, Sharon Leider, Laura Anderson and Ron Messer



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BALDWIN CITY COUNCIL EMERGENCY MEETING

MAY 14TH, 2026

Present – Mayor Jay Swanson, City Council; Tom Rush, Alan Walker, and Scott Case.

Absent: Jeff Holm

Call to Order – The 2026 emergency meeting of the City of Baldwin was called to order by Mayor Jay Swanson at 4:00 p.m.

Pledge of Allegiance – All present recited the Pledge of Allegiance

Discuss/Approve/Disapprove Change Order for TS Dirt Works – Mayor Swanson hereby called an emergency City Council meeting on Thursday, May 14th to discuss the change order for TS Dirt Works. The culvert that was in stock was the wrong diameter. The change order quote from TS Dirt Works is for a 15' pipe and two aprons and is \$5,640.00. Swanson proposed that the City Council approves the \$5,640.00 to allow the project to maintain its schedule without delay.

Walker/Rush unanimous to approve TS Dirt Works quote for \$5,640.00 to purchase a 15' pipe and two aprons.

Adjourn – **Rush/Case unanimous** to adjourn at 4:01 p.m.

Submitted By: (s/) Kayla Nielsen
Deputy Clerk/Treasurer
City of Baldwin

Approved By: (s/) Jay Swanson
Mayor
City of Baldwin

Date

Attendees: None

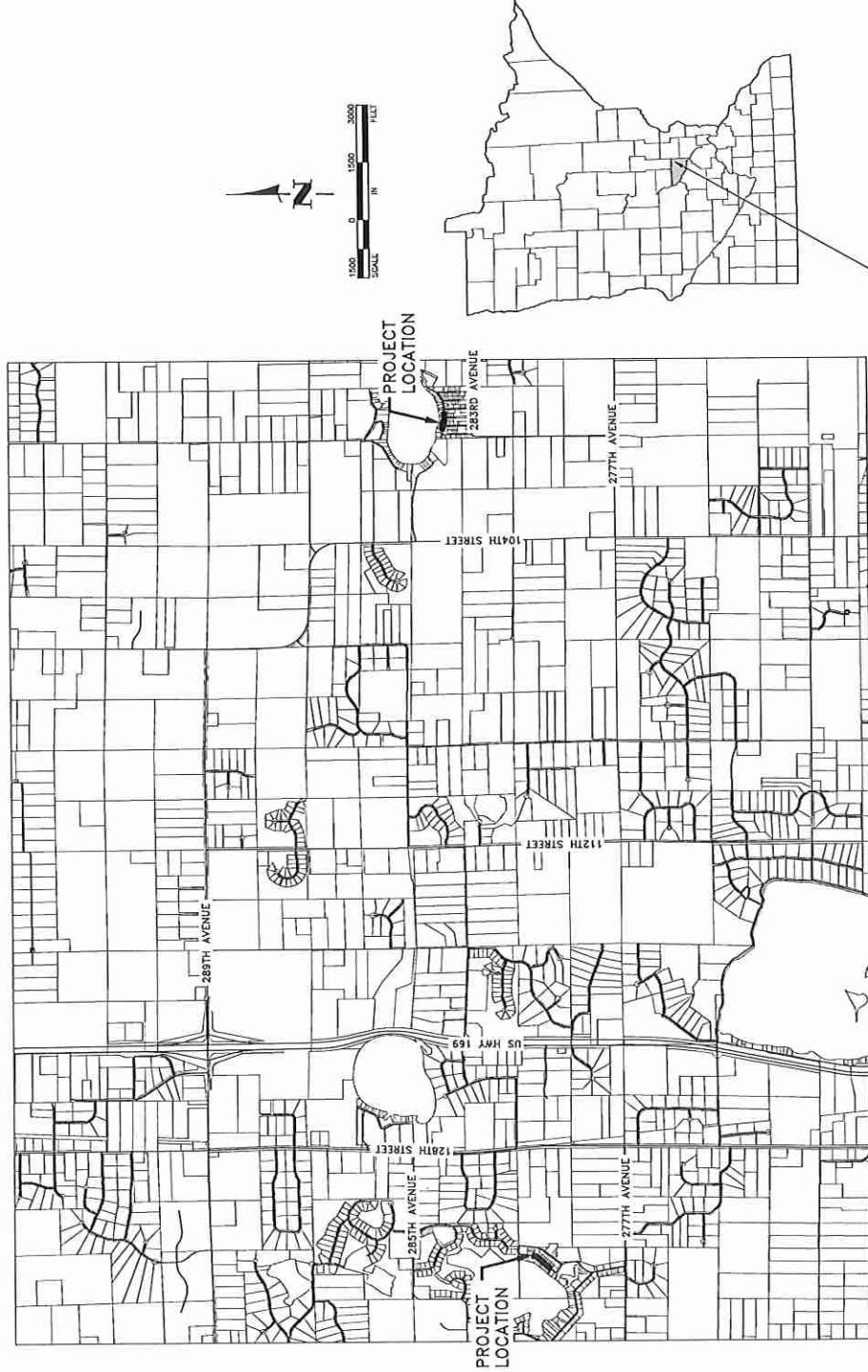
Engineers Estimate
2026 Sandy Lake and Lake Diann Improvement Project
City of Baldwin, Minnesota

ITEM NO.	Mn/DOT SPEC. NO.	ITEM DESCRIPTION	UNIT	UNIT PRICE	LAKE DIANN 133RD 1/2 STREET	EXTENSION	SANDY LAKE 284TH AVENUE	EXTENSION	TOTAL QUANTITY	TOTAL COST
1	2021.501	MOBILIZATION	LUMP SUM	\$5,000.00	0.50	\$2,500.00	0.50	\$2,500.00	1.00	\$5,000.00
2	2104.502	REMOVE CATCH BASIN	EACH	\$800.00					1.00	\$800.00
3	2104.502	SALVAGE CASTING	EACH	\$300.00			1.00	\$300.00	1.00	\$300.00
4	2104.502	SALVAGE SIGN	EACH	\$100.00			1.00	\$100.00	1.00	\$100.00
5	2104.502	SALVAGE MAIL BOX SUPPORT	EACH	\$200.00	2.00	\$400.00			2.00	\$400.00
6	2104.503	SAWING CONCRETE PAVEMENT - FULL DEPTH	LIN FT	\$15.00	10.00	\$150.00			10.00	\$150.00
7	2104.503	SAWING BITUMINOUS PAVEMENT - FULL DEPTH	LIN FT	\$5.00	256.00	\$1,280.00	118.00	\$590.00	374.00	\$1,870.00
8	2104.503	REMOVE SEWER PIPE (STORM)	LIN FT	\$100.00			15.00	\$1,500.00	15.00	\$1,500.00
9	2104.504	REMOVE CONCRETE PAVEMENT	SQ YD	\$50.00	2.00	\$100.00			2.00	\$100.00
10	2104.504	REMOVE BITUMINOUS PAVEMENT	SQ YD	\$6.00	91.00	\$546.00	44.00	\$264.00	135.00	\$810.00
11	2106.507	EXCAVATION - COMMON	CU YD	\$25.00	14.00	\$350.00	14.00	\$350.00	28.00	\$700.00
12	2211.507	STOCKPILE AGGREGATE	CU YD	\$30.00		\$1,000.00	38.00	\$950.00	78.00	\$1,950.00
13	2211.509	AGGREGATE BASE CLASS 5	TON	\$25.00	40.00		6.00	\$24.00	6.00	\$24.00
14	2357.506	BITUMINOUS MATERIAL FOR TACK COAT	GALLON	\$4.00		\$560.00			28.00	\$560.00
15	2360.504	TYPE SP 9.5 WEARING COURSE MIXTURE (2.B) 2.5" THICK	SQ YD	\$20.00	28.00		9.00	\$630.00	9.00	\$630.00
16	2360.509	TYPE SP 9.5 WEARING COURSE MIXTURE (2.B)	TON	\$70.00			9.00	\$630.00	9.00	\$630.00
17	2360.509	TYPE SP 12.5 NON WEARING COURSE MIXTURE (2.B)	TON	\$70.00			106.00	\$7,420.00	106.00	\$7,420.00
18	2503.503	12" RC PIPE SEWER DESIGN 3006 CLASS V	LIN FT	\$70.00			1.00	\$1,200.00	1.00	\$1,200.00
19	2503.502	CONNECT TO EXISTING STORM SEWER	EACH	\$1,200.00			1.00	\$1,200.00	1.00	\$1,200.00
20	2506.502	CASTING ASSEMBLY	EACH	\$500.00			1.00	\$500.00	1.00	\$500.00
21	2506.502	INSTALL CASTING	EACH	\$800.00			11.20	\$9,960.00	11.20	\$9,960.00
22	2506.503	CONSTRUCT DRAINAGE STRUCTURE DESIGN 4B-4020	LIN FT	\$7.00	18.00	\$126.00	27.00	\$189.00	45.00	\$315.00
23	2521.518	4" CONCRETE WALK	SQ FT	\$20.00	4.00	\$80.00			4.00	\$80.00
24	2521.602	DRILL AND GROUT DOWEL BAR (EPOXY COATED)	EACH	\$25.00		\$5,500.00	88.00	\$2,200.00	308.00	\$7,700.00
25	2531.503	CONCRETE CURB AND GUTTER DESIGN SPECIAL	LIN FT	\$200.00	2.00	\$400.00			2.00	\$400.00
26	2540.602	INSTALL MAIL BOX SUPPORT	LUMP SUM	\$1,000.00	0.50	\$500.00	0.50	\$500.00	1.00	\$1,000.00
27	2563.601	TRAFFIC CONTROL	EACH	\$200.00			1.00	\$200.00	1.00	\$200.00
28	2564.502	INSTALL SIGN	LIN FT	\$6.00			100.00	\$600.00	100.00	\$600.00
29	2572.503	TEMPORARY FENCE	EACH	\$200.00			2.00	\$400.00	2.00	\$400.00
30	2573.502	STORM DRAIN INLET PROTECTION	LIN FT	\$3.00	185.00	\$555.00	53.00	\$159.00	238.00	\$714.00
31	2573.503	SEDIMENT CONTROL LOG TYPE STRAW	LIN FT	\$40.00	22.00	\$880.00	10.00	\$400.00	32.00	\$1,280.00
32	2574.507	COMMON TOPSOIL BORROW	CU YD	\$3,000.00	0.50	\$1,500.00			0.50	\$1,500.00
33	2575.501	TURF ESTABLISHMENT	LUMP SUM	\$3,000.00					1.00	\$3,000.00

TOTAL ESTIMATED CONSTRUCTION COST
\$45,763.00
ESTIMATED CONSTRUCTION ADMINISTRATION COST (1 WEEK CONSTRUCTION TIME FRAME)
\$2,500.00
ESTIMATED CONSTRUCTION OBSERVATION COST (1 WEEK CONSTRUCTION TIME FRAME)
\$8,000.00
ESTIMATED CONSTRUCTION STAKING AND MATERIAL TESTING
\$3,500.00
TOTAL ESTIMATED CONSTRUCTION, ADMINISTRATION, OBSERVATION, STAKING, AND TESTING COST
\$59,763.00

2026 SANDY LAKE AND LAKE DIANN IMPROVEMENT PROJECT

CITY OF BALDWIN, MINNESOTA



THE SUBSURFACE UTILITY INFORMATION IN THIS PLAN IS UNDETERMINED. THE QUALITY LEVEL WAS DETERMINED ACCORDING TO THE GUIDELINES OF ASCE 38-22, ENTITLED "STANDARD GUIDELINES FOR INVESTIGATION AND DOCUMENTING EXISTING UTILITIES."



**Hakanson
Anderson**
Civil Engineers and Land Surveyors
205-427-5888 FAX 205-427-5529

GOVERNING SPECIFICATIONS
THE 2025 EDITION OF THE MINNESOTA DEPARTMENT OF TRANSPORTATION "STANDARD SPECIFICATIONS FOR CONSTRUCTION" SHALL APPLY.
ALL FEDERAL STATE AND LOCAL LAWS, REGULATIONS, AND ORDINANCES SHALL BE COMPLIED WITH IN THE CONSTRUCTION OF THIS PROJECT.
ALL TRAFFIC CONTROL DEVICES AND SIGNING SHALL CONFORM TO THE LATEST EDITION OF THE MINNESOTA MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES, INCLUDING THE LATEST FIELD MANUAL FOR TEMPORARY TRAFFIC CONTROL ZONE LAYOUTS.

SHEET INDEX

THIS PLAN CONTAINS 9 SHEETS

SHEET NO.	DESCRIPTION
1	TITLE SHEET
2	ESTIMATED QUANTITIES, LEGEND, AND CONSTRUCTION NOTES
3-4	EXISTING CONDITIONS AND REMOVALS PLAN
5-7	CONSTRUCTION PLANS
8-9	

I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the State of Minnesota.

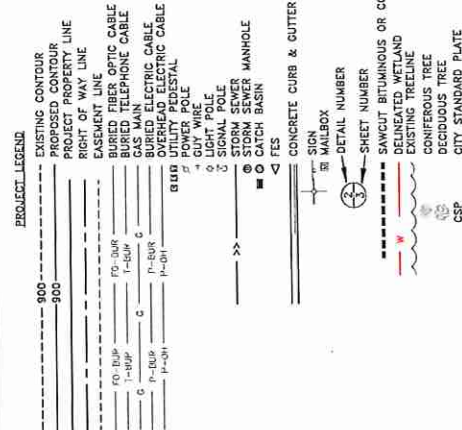
SAUEL G. JOCHUM, P.E., P.E. DATE 5/15/26
HAKANSON ANDERSON LIC. NO. 619333

DATE	REVISION

ESTIMATED QUANTITIES				
ITEM NO.	M/DOT SPEC. NO.	ITEM DESCRIPTION	UNIT	TOTAL ESTIMATED QUANTITY
1	2021.501	MOBILIZATION	LUMP SUM	1
2	2104.502	REMOVE CATCH BASIN	EACH	1
3	2104.502	SAVING CATCH BASIN	EACH	1
4	2104.502	SAVING CATCH BASIN	EACH	1
5	2104.502	SAVING CATCH BASIN	EACH	2
6	2104.502	SAVING CATCH BASIN	EACH	10
7	2104.502	SAVING CATCH BASIN	EACH	118
8	2104.502	SAVING CATCH BASIN	EACH	15
9	2104.502	SAVING CATCH BASIN	EACH	2
10	2104.502	SAVING CATCH BASIN	EACH	2
11	2104.502	SAVING CATCH BASIN	EACH	2
12	2104.502	SAVING CATCH BASIN	EACH	2
13	2104.502	SAVING CATCH BASIN	EACH	2
14	2104.502	SAVING CATCH BASIN	EACH	2
15	2104.502	SAVING CATCH BASIN	EACH	2
16	2104.502	SAVING CATCH BASIN	EACH	2
17	2104.502	SAVING CATCH BASIN	EACH	2
18	2104.502	SAVING CATCH BASIN	EACH	2
19	2104.502	SAVING CATCH BASIN	EACH	2
20	2104.502	SAVING CATCH BASIN	EACH	2
21	2104.502	SAVING CATCH BASIN	EACH	2
22	2104.502	SAVING CATCH BASIN	EACH	2
23	2104.502	SAVING CATCH BASIN	EACH	2
24	2104.502	SAVING CATCH BASIN	EACH	2
25	2104.502	SAVING CATCH BASIN	EACH	2
26	2104.502	SAVING CATCH BASIN	EACH	2
27	2104.502	SAVING CATCH BASIN	EACH	2
28	2104.502	SAVING CATCH BASIN	EACH	2
29	2104.502	SAVING CATCH BASIN	EACH	2
30	2104.502	SAVING CATCH BASIN	EACH	2
31	2104.502	SAVING CATCH BASIN	EACH	2
32	2104.502	SAVING CATCH BASIN	EACH	2
33	2104.502	SAVING CATCH BASIN	EACH	2

BASIS OF ESTIMATED QUANTITIES	
AGGREGATE BASE CLASS 5	100 lbs/cy/in
NON WEARING BITUMINOUS COURSE MIXTURE	110 lbs/cy/in
WEARING COURSE BITUMINOUS MIXTURE	110 lbs/cy/in
BITUMINOUS MATERIAL FOR TACK COAT - NEW ASPHALT	0.06 gal/cy
BITUMINOUS MATERIAL FOR TACK COAT - OLD ASPHALT	0.07 gal/cy
BITUMINOUS MATERIAL FOR TACK COAT - MILLED ASPHALT	0.08 gal/cy
HYDRAULIC FIBER BONDED MATRIX	3500 lbs/acre
SEED MIX SOUTHERN BULWATER	320 lbs/acre
TYPE 1, COMMERCIAL FERTILIZER	300 lbs/acre

STANDARD PLATES	
PLATE NO.	DESCRIPTION
3000M	REINFORCED CONCRETE PIPE (6 SHEETS)
3006H	GASKET JOINT FOR R.C. PIPE (2 SHEETS)
3007F	SHEAR REINFORCEMENT FOR PRECAST DRAINAGE STRUCTURES
4011E	PRECAST CONCRETE BASE
4020J	MANHOLE OR CATCH BASIN
4026B	CONCRETE ENCASED CONCRETE ADJUSTING RINGS
4108F	ADJUSTING RINGS FOR CATCH BASINS AND MANHOLES
4110F	COVER CASTING FOR MANHOLES
4180J	MANHOLE OR CATCH BASIN STEP



- GENERAL CONSTRUCTION AND SOILS NOTES:
- WHEN PLACING NEW PAVEMENT ADJACENT TO EXISTING PAVEMENT, THE PAVEMENT SHALL BE CUT VERTICALLY TO THE BOTTOM OF THE EXISTING PAVEMENT, AND THE EXISTING PAVEMENT SHALL BE REPAVED TO THE BOTTOM OF THE EXISTING PAVEMENT.
 - PAVEMENT SHALL BE CUT WHEN PLACING NEW PAVEMENT ADJACENT TO EXISTING PAVEMENT.
 - BITUMINOUS AND CONCRETE ITEMS DISTURBED BY CONSTRUCTION SHALL BE REPLACED IN ACCORDANCE WITH THE PROPERTY OF THE CONTRACTOR AND SHALL BE DISPOSED OF IN ACCORDANCE WITH MN/DOT SPEC. 2104.
 - USE TACK COAT BETWEEN ALL BITUMINOUS MIXTURES. THE BITUMINOUS TACK COAT MATERIAL SHALL BE APPLIED AT A MINIMUM RATE OF 0.06 GAL/SY TO 0.07 GAL/SY BETWEEN BITUMINOUS LAYERS. THE APPLICATION RATES ARE FOR UNDISTURBED BITUMINOUS.
 - PERFORMANCE GRADED (PG) ASPHALT BINDER PG 58-28, SPEC. 3151, SHALL BE USED FOR ALL BITUMINOUS MIXES ON THIS PROJECT. SPECIFIC PG GRADES SHALL BE STATED IN THE NOTES SHOWN ON THE TYPICAL SPECIFICATIONS.
 - THE BITUMINOUS MIXTURES SHALL MEET THE REQUIREMENTS OF SPECIFICATIONS 2360 AND 3150.
 - IF NECESSARY, THE UTILITY COMPANIES WILL RELOCATE THEIR FACILITIES CONCURRENTLY WITH THE CONSTRUCTION OPERATIONS. THE CONTRACTOR SHALL SCHEDULE CONSTRUCTION IN COOPERATION WITH UTILITY RELOCATION.
 - ALL TRENCH AND OTHER EXCAVATIONS GREATER THAN 24 INCHES DEEP SHALL BE BACKFILLED AT THE END OF EACH WORK DAY. EXTRA WORK REQUIRED TO BACKFILL AND CORRESPONDINGLY REMOVE MATERIAL THE NEXT WORK DAY SHALL BE INCIDENTAL MATERIAL. EQUIPMENT AND WORK REQUIRED TO PROTECT CONCRETE PAVEMENT AGAINST COLD WEATHER SHALL BE INCIDENTAL.
 - DEWATERING REQUIRED FOR THE CONSTRUCTION OF THE STORM SEWER AND OTHER WORK SHALL BE INCIDENTAL.
 - THE CONCRETE MIX DESIGNS FOR THIS PROJECT SHALL BE 3550 FOR MANHOLE CONCRETE, 3550 FOR RINGS, 3550 FOR CATCH BASIN CONCRETE. ENTRAINED AIR SHALL BE MAINTAINED BETWEEN 5% AND 7%.
 - ALL DISTURBED AREAS SHALL BE DRESSED WITH TOPSOIL, SEED, FERTILIZED, AND STABILIZED WITH HYDRAULIC BONDED FIBER MATRIX AT THE RATES SHOWN IN THE BASIS OF ESTIMATED QUANTITIES TABLE. SEEDING SHALL BE A SEPARATE ITEM. TOPSOIL SHALL BE PAID AS ITEM 2574 COMMON TOPSOIL BORROW. ALL OTHER WORK DESCRIBED IN THIS NOTE SHALL BE PAID AS ITEM 2572 TURF ESTABLISHMENT.
 - ALL EXCESS SOIL MATERIAL SHALL BE DISPOSED OF OFF SITE BY THE CONTRACTOR. THIS WORK SHALL BE INCIDENTAL.
 - INLET PROTECTION IS REQUIRED AT ALL CATCH BASINS.
 - ALL ITEMS DAMAGED BY THE CONTRACTOR SHALL BE REPAIRED AND PROTECTED BY THE CONTRACTOR. THE CONTRACTOR SHALL BE RESPONSIBLE TO REPLACE WITH NO ADDITIONAL COST. BECOME THE CONTRACTOR'S RESPONSIBILITY TO ALLOW RESIDENTS DRIVEWAY ACCESS AT ALL TIMES.
 - CONTRACTORS MUST ALLOW RESIDENTS DRIVEWAY ACCESS AT ALL TIMES.
 - EROSION CONTROL AND SOIL NOTES:
 - EROSION CONTROL SHALL CONFORM TO THE MN/DOT EROSION CONTROL HANDBOOK.
 - THE CONTRACTOR SHALL INSTALL EROSION AND SEDIMENT CONTROL FACILITIES (DMP'S) PRIOR TO GRADING AND REMOVAL ACTIVITIES. DMP'S SHALL BE MAINTAINED THROUGHOUT THE CONSTRUCTION OF CONSTRUCTION ACTIVITIES AND SHALL BE REMOVED WHEN CONSTRUCTION HAS PASSED.
 - THE CONTRACTOR SHALL SCHEDULE THEIR OPERATION TO MINIMIZE THE AMOUNT OF DISTURBED AREA AT ANY GIVEN TIME.
 - ALL EXPOSED SOIL AREAS MUST BE STABILIZED AS SOON AS POSSIBLE TO LIMIT SOIL EROSION BUT IN NO CASE LATER THAN 14 DAYS AFTER EXPOSURE OR PERMANENTLY CEASED. THAT PORTION OF THE SITE HAS TEMPORARILY OR PERMANENTLY CEASED.
 - PREPARE THE SOIL IN ACCORDANCE WITH MN/DOT SPEC 2574 AND RECEIVE ENGINEER APPROVAL PRIOR TO PLACING THE SEED. INSPECTION FOR SEEDING BED PREPARATION REQUIRES A 24 HOUR NOTICE.
 - SCHEDULE THE WORK SUCH THAT TEMPORARY STABILIZATION MEASURES ARE IN PLACE PRIOR TO THE START OF CONSTRUCTION. STABILIZATION MEASURES ARE REQUIRED DUE TO THE CONTRACTORS STAGING. THIS WORK SHALL BE INCIDENTAL AND NO PAYMENT WILL BE MADE.
 - REVEGETATION AND STABILIZATION SHALL OCCUR WITHIN 7 DAYS OF CONSTRUCTION ACTIVITY CEASING.
 - STREETS AND SIDEWALKS ADJACENT TO THE CONSTRUCTION SHALL BE KEPT FREE OF SEDIMENT CAUSED BY CONSTRUCTION TRAFFIC. SITE RUNOFF AND BLOWING DUST, HAND BROOM OR PICKUP SWEEPER SHALL BE EMPLOYED. KICK BROOM STYLE SWEEPER IS NOT ALLOWED. SWEEPING SHALL BE INCIDENTAL.
 - ALL EROSION AND SEDIMENT CONTROL MEASURES SHALL BE PROPERLY MAINTAINED THROUGHOUT THE CONSTRUCTION. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE EROSION CONTROL WITHIN THIRTY (30) DAYS AFTER FINAL SITE STABILIZATION IS APPROVED BY THE ENGINEER. THIS WORK SHALL BE INCIDENTAL.

Hakanson Anderson
Civil Engineers and Land Surveyors
3600 Lake Ave. N., Suite 100
Minneapolis, MN 55412
763-427-5860 FAX 763-427-0520
www.hakanson-anderson.com

DATE: _____
REVISION: _____
DRAWN BY: _____
CHECKED BY: _____
IN CHARGE: _____
DATE: 5/15/26

2025 SANDY LAKE AND LAKE DIANN
IMPROVEMENT PROJECT

ESTIMATED QUANTITIES, LEGEND, AND
CONSTRUCTION NOTES

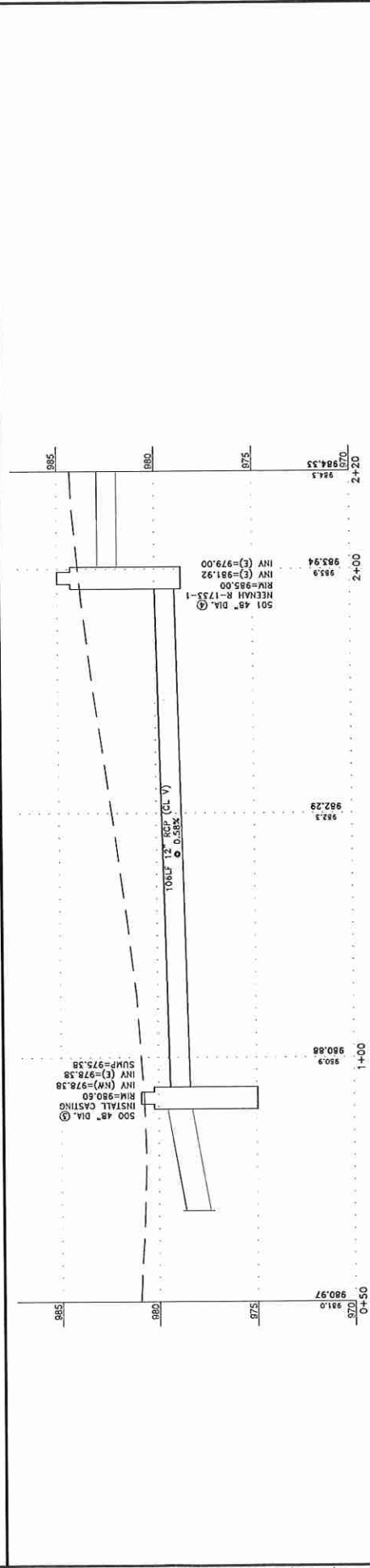
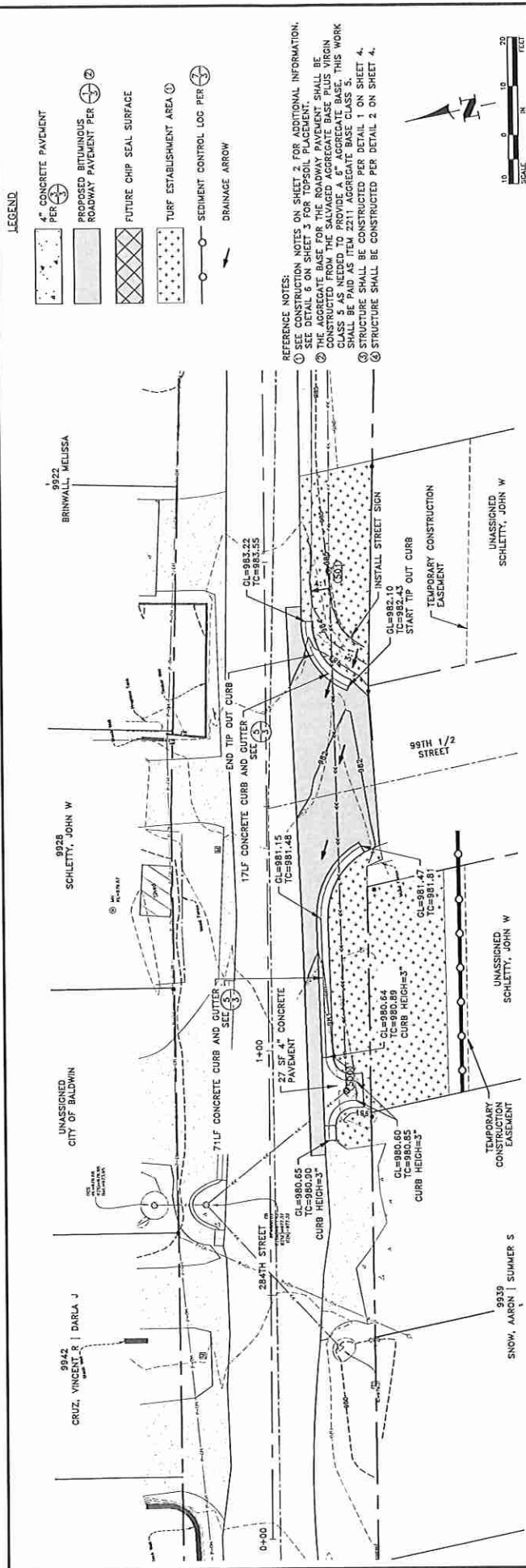
CITY OF BALDWIN, MINNESOTA

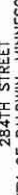
SHEET 2 OF 9

9
PAGE

80309





DATE		REVISION		I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under chapter 10A of the State of Minnesota. 		 Hokanson Anderson Civil Engineers and Land Surveyors 3601 Franklin Avenue, Suite 100 763-427-5860 FAX 763-427-0520 www.hokanson-anderson.com		2025 SANDY LAKE AND LAKE DIANN IMPROVEMENT PROJECT		CONSTRUCTION PLANS 284TH STREET CITY OF BALDWIN, MINNESOTA		SHEET 9		9 OF SHEETS 893509	

**CITY OF BALDWIN
SHERBURNE COUNTY, MINNESOTA**

**REQUEST FOR QUOTES FOR THE 2026 SANDY LAKE AND LAKE DIANN
IMPROVEMENT PROJECT**

I. INTRODUCTION

The City of Baldwin, Sherburne County, Minnesota is soliciting Quotes for a contract to have an independent third party provide construction services for the City. The attached construction plans show the locations of the work area and the work that needs to be performed.

One copy of the documents listed in Section II must be submitted. The documents must be submitted by **1:00 P.M. On June 11, 2026** in order to be considered. Documents may be mailed, delivered, or emailed. All documents are to be made to:

Attn: Sam Jochum, City Engineer
c/o Hakanson Anderson
3601 Thurston Avenue
Anoka, MN 55303

Phone: 763-852-0488
Email: samj@haa-inc.com

II. SUBMITTAL OF QUOTE

1. The Contractor shall submit its Quote based off the estimated quantities in the construction plans.
2. The Contractor shall submit a Responsible Contractor Form with its Quote.
3. Contractor shall submit an Affidavit of Non Collusion with its Quote.

III. CONTRACT REQUIREMENTS

1. Upon acceptance of a Quote, Contractor shall enter into the attached Contract for Local Improvement with the City of Baldwin.
2. If the Quote is accepted, the Contractor shall provide proof of insurance and shall name The City of Baldwin and Hakanson Anderson Associates, Inc. as additional insured.
3. If the Quote is accepted, the Contractor shall provide the City with Performance and Payment Bonds acceptable to the City Attorney.

IV. GENERAL REQUIREMENTS

1. The Contractor shall furnish all labor, tools, materials, equipment and supervision necessary for the performance of all operations.
2. The contractor shall provide all traffic control in conformance with the MN MUTCD.
3. The Contractor shall provide the City with a schedule for completion of the work.
4. All divisions of the Minnesota Department of Transportation (MnDOT), "Standard Specifications for Construction", 2025 Edition, shall apply to all construction performed under this contract.

**CITY OF BALDWIN
SHERBURNE COUNTY, MINNESOTA**

**REQUEST FOR QUOTES FOR THE 2026 SANDY LAKE AND LAKE DIANN
IMPROVEMENT PROJECT**

V. SCHEDULE

1. The successful Contractor will be notified on or about June 18, 2026.
2. The work must be completed by August 14, 2026.

Date: May 18, 2026

By: _____
Sam Jochum, City Engineer

Enclosures:

Responsible Contractor Form
Affidavit of Non-Collusion
Contract for Local Improvement
Construction Plans

**RESPONSIBLE CONTRACTOR VERIFICATION AND
CERTIFICATION OF COMPLIANCE**

PROJECT: 2026 SANDY LAKE AND LAKE DIANN IMPROVEMENT PROJECT

Minn. Stat. § 16C.285, Subd. 7. **IMPLEMENTATION.** ... any prime contractor or subcontractor or motor carrier that does not meet the minimum criteria in subdivision 3 or fails to verify that it meets those criteria is not a responsible contractor and is not eligible to be awarded a construction contract for the project or to perform work on the project...

Minn. Stat. § 16C.285, Subd. 3. **RESPONSIBLE CONTRACTOR, MINIMUM CRITERIA.** "Responsible contractor" means a contractor that conforms to the responsibility requirements in the solicitation document for its portion of the work on the project and verifies that it meets the following minimum criteria:

- | | |
|-----|---|
| (1) | <p>The Contractor:</p> <ul style="list-style-type: none">(i) is in compliance with workers' compensation and unemployment insurance requirements;(ii) is currently registered with the Department of Revenue and the Department of Employment and Economic Development if it has employees;(iii) has a valid federal tax identification number or a valid Social Security number if an individual; and(iv) has filed a certificate of authority to transact business in Minnesota with the Secretary of State if a foreign corporation or cooperative. |
| (2) | <p>The contractor or related entity is in compliance with and, during the three-year period before submitting the verification, has not violated section 177.24, 177.25, 177.41 to 177.44, 181.03, 181.101, 181.13, 181.14, or 181.722, and has not violated United States Code, title 29, sections 201 to 219, or United States Code, title 40, sections 3141 to 3148. For purposes of this clause, a violation occurs when a contractor or related entity:</p> <ul style="list-style-type: none">(i) repeatedly fails to pay statutorily required wages or penalties on one or more separate projects for a total underpayment of \$25,000 or more within the three-year period, provided that a failure to pay is "repeated" only if it involves two or more separate and distinct occurrences of underpayment during the three-year period;(ii) has been issued an order to comply by the commissioner of Labor and Industry that has become final;(iii) has been issued at least two determination letters within the three-year period by the Department of Transportation finding an underpayment by the contractor or related entity to its own employees;(iv) has been found by the commissioner of Labor and Industry to have repeatedly or willfully violated any of the sections referenced in this clause pursuant to section 177.27;(v) has been issued a ruling or findings of underpayment by the administrator of the Wage and Hour Division of the United States Department of Labor that have become final or have been upheld by an administrative law judge or the Administrative Review Board; or(vi) has been found liable for underpayment of wages or penalties or misrepresenting a construction worker as an independent contractor in an action brought in a court having jurisdiction. Provided that, if the contractor or related entity contests a determination of underpayment by the Department of Transportation in a contested case proceeding, a violation does not occur until the contested case proceeding has concluded with a determination that the contractor or related entity underpaid wages or penalties;* |

(3)	The contractor or related entity is in compliance with and, during the three-year period before submitting the verification, has not violated section 181.723 or chapter 326B. For purposes of this clause, a violation occurs when a contractor or related entity has been issued a final administrative or licensing order;*
(4)	The contractor or related entity has not, more than twice during the three-year period before submitting the verification, had a certificate of compliance under section 363A.36 revoked or suspended based on the provisions of section 363A.36, with the revocation or suspension becoming final because it was upheld by the Office of Administrative Hearings or was not appealed to the office;*
(5)	The contractor or related entity has not received a final determination assessing a monetary sanction from the Department of Administration or Transportation for failure to meet targeted group business, disadvantaged business enterprise, or veteran-owned business goals, due to a lack of good faith effort, more than once during the three-year period before submitting the verification;*
	* Any violations, suspensions, revocations, or sanctions, as defined in clauses (2) to (5), occurring prior to July 1, 2014, shall not be considered in determining whether a contractor or related entity meets the minimum criteria.
(6)	The contractor or related entity is not currently suspended or debarred by the federal government or the state of Minnesota or any of its departments, commissions, agencies, or political subdivisions that have authority to debar a contractor; and
(7)	All subcontractors and motor carriers that the contractor intends to use to perform project work have verified to the contractor through a signed statement under oath by an owner or officer that they meet the minimum criteria listed in clauses (1) to (6).

Minn. Stat. § 16C.285, Subd. 5. SUBCONTRACTOR VERIFICATION.

A prime contractor or subcontractor shall include in its verification of compliance under subdivision 4 a list of all of its first-tier subcontractors that it intends to retain for work on the project. Prior to execution of a construction contract, and as a condition precedent to the execution of a construction contract, the apparent successful prime contractor shall submit to the contracting authority a supplemental verification under oath confirming compliance with subdivision 3, clause (7). Each contractor or subcontractor shall obtain from all subcontractors with which it will have a direct contractual relationship a signed statement under oath by an owner or officer verifying that they meet all of the minimum criteria in subdivision 3 prior to execution of a construction contract with each subcontractor.

If a prime contractor or any subcontractor retains additional subcontractors on the project after submitting its verification of compliance, the prime contractor or subcontractor shall obtain verifications of compliance from each additional subcontractor with which it has a direct contractual relationship and shall submit a supplemental verification confirming compliance with subdivision 3, clause (7), within 14 days of retaining the additional subcontractors.

A prime contractor shall submit to the contracting authority upon request copies of the signed verifications of compliance from all subcontractors of any tier pursuant to subdivision 3, clause (7). A prime contractor and subcontractors shall not be responsible for the false statements of any subcontractor with which they do not have a direct contractual relationship. A prime contractor and subcontractors shall be responsible for false statements by their first-tier subcontractors with which they have a direct contractual relationship only if they accept the verification of compliance with actual knowledge that it contains a false statement.

Subd. 5a. Motor carrier verification. A prime contractor or subcontractor shall obtain annually from all motor carriers with which it will have a direct contractual relationship a signed statement under oath by an owner or officer verifying that they meet all of the minimum criteria in subdivision 3 prior to execution of a construction contract with each motor carrier. A prime contractor or subcontractor shall require each such motor carrier to provide it with immediate written notification in the event that the motor carrier no longer meets one or more of the minimum criteria in subdivision 3 after submitting its annual verification. A motor carrier shall be ineligible to perform work on a project covered by this section if it does not meet all the minimum criteria in subdivision 3. Upon request, a prime contractor or subcontractor shall submit to the contracting authority the signed verifications of compliance from all motor carriers providing for-hire transportation of materials, equipment, or supplies for a project.

Minn. Stat. § 16C.285, Subd. 4. VERIFICATION OF COMPLIANCE.

A contractor responding to a solicitation document of a contracting authority shall submit to the contracting authority a signed statement under oath by an owner or officer verifying compliance with each of the minimum criteria in subdivision 3, with the exception of clause (7), at the time that it responds to the solicitation document.

A contracting authority may accept a signed statement under oath as sufficient to demonstrate that a contractor is a responsible contractor and shall not be held liable for awarding a contract in reasonable reliance on that statement. A prime contractor, subcontractor, or motor carrier that fails to verify compliance with any one of the required minimum criteria or makes a false statement under oath in a verification of compliance shall be ineligible to be awarded a construction contract on the project for which the verification was submitted.

A false statement under oath verifying compliance with any of the minimum criteria may result in termination of a construction contract that has already been awarded to a prime contractor or subcontractor or motor carrier that submits a false statement. A contracting authority shall not be liable for declining to award a contract or terminating a contract based on a reasonable determination that the contractor failed to verify compliance with the minimum criteria or falsely stated that it meets the minimum criteria. A verification of compliance need not be notarized. An electronic verification of compliance made and submitted as part of an electronic bid shall be an acceptable verification of compliance under this section provided that it contains an electronic signature as defined in section 325L.02, paragraph (h).

CERTIFICATION

By signing this document I certify that I am an owner or officer of the company, and I swear under oath that:

- 1) My company meets each of the Minimum Criteria to be a responsible contractor as defined herein and is in compliance with Minn. Stat. § 16C.285, and
- 2) I have included a First Tier Subcontractors List with my company's solicitation response, and
- 3) if my company is awarded a contract, I will also submit the Additional Subcontractors List as required.

Authorized Signature of Owner or Officer:	Printed Name:
Title:	Date:
Company Name:	

Sworn to and subscribed before me this
_____ day of _____, 20__

Notary Public

My Commission Expires: _____

PLACE NOTARY STAMP HERE

NOTE: Minn. Stat. § 16C.285, Subd. 2, (c) If only one prime contractor responds to a solicitation document, a contracting authority may award a construction contract to the responding prime contractor even if the minimum criteria in subdivision 3 are not met.

FIRST-TIER SUBCONTRACTORS LIST

SUBMIT WITH PRIME CONTRACTOR PROPOSAL

PROJECT: 2026 SANDY LAKE AND LAKE DIANN IMPROVEMENT PROJECT

Minn. Stat. § 16C.285, Subd. 5. A prime contractor or subcontractor shall include in its verification of compliance under subdivision 4 a list of all of its first-tier subcontractors that it intends to retain for work on the project. Prior to execution of a construction contract, and as a condition precedent to the execution of a construction contract, the apparent successful prime contractor shall submit to the contracting authority a supplemental verification under oath confirming compliance with subdivision 3, clause (7). Each contractor or subcontractor shall obtain from all subcontractors with which it will have a direct contractual relationship a signed statement under oath by an owner or officer verifying that they meet all of the minimum criteria in subdivision 3 prior to execution of a construction contract with each subcontractor.

FIRST TIER SUBCONTRACTOR NAMES (Legal name of company as registered with the Secretary of State)	Name of city where company home office is located

FIRST TIER SUBCONTRACTOR NAMES (Legal name of company as registered with the Secretary of State)	Name of city where company home office is located

SUPPLEMENTAL CERTIFICATION FOR FIRST-TIER SUBCONTRACTORS LIST	
By signing this document I certify that I am an owner or officer of the company, and I certify under oath that: All first-tier subcontractors listed on First-Tier Subcontractors List have verified through a signed statement under oath by an owner or officer that they meet the minimum criteria to be a responsible contractor as defined in Minn. Stat. § 16C.285.	
Authorized Signature of Owner or Officer:	Printed Name:
Title:	Date:
Company Name:	

AFFIDAVIT OF NON-COLLUSION

STATE OF MINNESOTA

COUNTY OF _____

I hereby swear (or affirm) under the penalty of perjury:

1. That I am the Bidder (if the bidder is an individual), a partner in the Bidder (if the bidder is a partnership) or an officer or employee of the Bidder corporation having authority to sign on its behalf (if the bidder is a corporation);
2. That the attached bid or bids have been arrived at by the Bidder individually and have been submitted without collusion with, and without any agreement, understanding or planned common course of action designed to limit individual bidding or competition with any other prospective Bidder or vendor of any materials, supplies, equipment or services described in the invitation to bid;
3. That the contents of the bid or bids have not been communicated by the Bidder or its employees or agents to any person not an employee or agent of the Bidder or its Surety on any bond furnished with the bid or bids, and will not be communicated to any such person, prior to any official opening of the bid or bids; and
4. That I have fully informed myself regarding the accuracy of the statements made in this affidavit.

Subscribed and sworn to before me _____
(Bidder)

this _____ day of _____, 2026.

(Firm making bid or bids)

Official Title

CONTRACT FOR LOCAL IMPROVEMENT

2026 Sandy Lake and Lake Diann Improvement Project City of Baldwin, Minnesota

1. This agreement made this _____ day of _____ 2026 between the City of Baldwin, Sherburne County, hereafter referred to as the "City", and _____ hereinafter called the "contractor", witnessed;
2. The contractor, for and in consideration of the payment or payments herein specified and by the City to be made, hereby covenants and agrees to furnish all materials, all necessary tools and equipment, and to do and perform all the work and labor necessary as per the Request for Quotes for 2026 Sandy Lake and Lake Diann Improvement Project and the Proposal of contractor (both attached to this Agreement). Said Proposal is hereby referred to and made a part of this contract as fully and to the same extent as if herein set forth in detail.
3. The contractor also agrees that all the work and labor shall be done in the best and most diligent manner and that all materials and labor shall be in entire and strict conformity in every respect with the said specifications and plans and shall be subject to the inspection and approval of the City Road Supervisor designated by the proper authorities of the City for the supervision of the work, and in case any of said material or labor shall be rejected by the City Road Supervisor as defective or unsuitable, then the materials shall be removed and replaced with other approved materials and the labor shall be done anew to the satisfaction and approval of the City Road Supervisor at the cost and expense of the contractor.
4. The contractor agrees to commence the work as herein provided for, at the earliest practicable date and to prosecute the same diligently and without delay and to have the work entirely completed in every respect to the satisfaction and approval of the City Road Supervisor, aforesaid, on or before August 14, 2026. In case of the failure on the part of the contractor, for any reason except with the written consent of the City Council, to complete the work on or before the date aforesaid, the City shall have the right to deduct from any money due or which may become due to the contractor, the amount of \$400.00 per day for each and every day elapsing between the time stipulated for the completion, and the actual date of completion, in accordance with the terms thereof; or if no moneys

shall be due the contractor, the City shall have the right to recover such sum; such deduction to be made or such sum to be recovered not as a penalty, but as liquidated damages, and in addition to such liquidated damages, the contractor agrees to pay all cost of local superintendence of the work during such delay. The contractor agrees to notify the City Council in writing of any and all causes of delay of such work or any part thereof, within 24 hours after such cause of delay shall arise, and in case of the failure of the contractor to perform this contract and complete work immediately, or at any time thereafter, the City may proceed to complete the work at the cost and expense of the contractor. Upon receipt of written notice from the contractor of the existence of causes over which the contractor has no control and which must delay the completion of the work, the City Council may at its discretion, extend the date herein before specified for the completion of the work and in such case the contractor shall become liable for such liquidated damages for failure to perform and for all costs of the local superintendence of the work during any delay after the time is so extended.

5. No claim for extra work done by the contractor will be made by the contractor or allowed by the City, nor shall the contractor do any work not covered in the proposal submitted, unless such work is ordered in writing by the City Council. Any such work, which may be done by the contractor without such written order first being given, shall be at the contractor's own risk and expense. When any extra work is ordered by the City Council to be done, the contractor shall do such work for the actual cost thereof plus ten percent; and when any alteration of plans is ordered by the City Council, the contractor agrees to perform the work as altered and if such alteration shall reduce the cost of doing such work, the actual amount of such reduction in cost shall be deducted from the contract price for the work.
6. The contractor further agrees to pay all laborers employed, and all subcontractors in and about the performance of this contract, and for all by them so performed, but in case the contractor shall fail so to pay and to satisfy every and all claims and demands for labor as aforesaid, the City may apply the monies due and coming to the contractor under this contract toward paying and satisfying such claims and demands, and the City is herewith given the right to apply monies due and coming to the contractor hereunder towards paying any indebtedness or claim heretofore accrued or which may hereafter come due to

the City from the contractor on any account whatsoever, and the amount of such payments shall be charged against the balance due the contractor hereunder; provided that nothing herein contained nor any variation from the amounts of the installments or from the manner and times of their payment shall be construed as impairing the right of the City or of those to whose benefit the bond herein agreed upon shall insure, to hold the contractor or surety liable on the bond for any breach of the conditions of the same nor as imposing upon the City any obligation to laborers, contractors, or sureties to pay or to retain for their benefit any monies coming to the contractor hereunder.

7. The contractor agrees to hold the City harmless from all damages and claims for damages that may arise by reason of any negligence or violation of the law on the part of the contractor, contractor's agents or employees, while engaged in the performance of this contract and agrees to take all precautions necessary to protect the public against injury, and to keep danger signals out at night and at such other times and such places as public safety may require. In addition, contractor agrees to keep in force statutory workers' compensation insurance. Additionally, he shall maintain at all times during the performance of this contract liability coverage naming the City of Baldwin and Hakanson Anderson Associates, Inc. as an additional insured in at least the amount of \$500,000 per claimant and \$1,500,000 for each incident. If the amount of this contract is \$75,000 or more, contractor shall post with the City payment and performance bonds acceptable to the City in the amount of the contract to secure the faithful performance of this contract and the payment of all subcontractors by the contractor and to be conditioned as required by Minnesota Statutes, Section 574.26 to 574.32.
8. In consideration of the covenants and agreements stated above the City agrees to pay the contractor the sum mentioned in the proposal or quote of the contractor, which is attached hereto and made a part of this contract as fully and to the same extent as if herein set forth in full. The City shall hold payment until the final performance and completion of this contract by the contractor to the satisfaction, approval, and acceptance of the City Council including provision by the contractor of Minnesota Department of Revenue Form IC-134.
9. It is agreed and understood by the parties hereto that the use of said work and improvement project at any time by the City for any purposes shall not be construed to be

or operate as an acceptance by the City of the work to be done by the contractor under this contract.

IN WITNESS WHEREOF, the parties have caused this agreement to be signed in their behalf by the proper officers thereunto duly authorized and their corporate seal to be hereto affixed, the day and year first above written.

In the presence of

[CONTRACTOR]

CITY OF BALDWIN

By _____

By: _____

Attest: _____

Its: _____

2026 SANDY LAKE AND LAKE DIANN IMPROVEMENT PROJECT

CITY OF BALDWIN, MINNESOTA



CITY OF BALDWIN,
SHERBURNE COUNTY,
MINNESOTA

THE SURFACE UTILITY INFORMATION
IN THIS PLAN IS UTILITY QUALITY LEVEL
0. THIS QUALITY LEVEL WAS DETERMINED
ACCORDING TO THE GUIDELINES OF
ASCE 38-22, ENTITLED "STANDARDS
GUIDELINES FOR INVESTIGATION AND
DOCUMENTING EXISTING UTILITIES."

GOVERNING SPECIFICATIONS

THE 2025 EDITION OF THE MINNESOTA DEPARTMENT OF TRANSPORTATION
"STANDARD SPECIFICATIONS FOR CONSTRUCTION" SHALL APPLY.
ALL FEDERAL, STATE AND LOCAL LAWS, REGULATIONS, AND ORDINANCES
SHALL BE COMPLIED WITH IN THE CONSTRUCTION OF THIS PROJECT.
ALL TRAFFIC CONTROL DEVICES AND SIGNING SHALL CONFORM TO THE
LATEST EDITION OF THE MINNESOTA MANUAL ON UNIFORM TRAFFIC
CONTROL DEVICES, INCLUDING THE LATEST FIELD MANUAL FOR
TEMPORARY TRAFFIC CONTROL ZONE LAYOUTS.

SHEET INDEX

THIS PLAN CONTAINS 9 SHEETS

SHEET NO.	DESCRIPTION
1	TITLE SHEET
2	ESTIMATED QUANTITIES, LEGEND, AND CONSTRUCTION NOTES
3-4	DETAILS
5-7	EXISTING CONDITIONS AND REMOVALS PLAN
8-9	CONSTRUCTION PLANS

I hereby certify that this plan, specification, or report was prepared
by me or under my direct supervision and that I am a duly licensed
Professional Engineer under the laws of the State of Minnesota.

 61933 DATE 5/15/26
SAMUEL G. JOCHUM, P.E., P.E. LIC. NO.
HAKANSON ANDERSON
DESIGN ENGINEER

DATE	REVISION

SHEET 1 OF 9 SHEETS

80309

**Hakanson
Anderson**
Civil Engineers and Land Surveyors
3820 Thorpe Ave., Anoka, Minnesota 55303
763-427-3850 Fax 763-427-6535

ESTIMATED QUANTITIES					Lake Drain 133rd 1/2		Sandy Lake 25th Ave	
ITEM NO.	M/DOT SPEC NO.	ITEM DESCRIPTION	UNIT	TOTAL ESTIMATED QUANTITY	SO	SI	SO	SI
1	2014 601	MOBILIZATION	LUMP SUM	1	0.50		0.50	
2	2104 602	REMOVE CATCH BASIN	EACH	1			1	
3	2104 602	SALVAGE CASTING	EACH	1			1	
4	2104 602	SALVAGE SIGN	EACH	1			1	
5	2104 602	SALVAGE MAIL BOX SUPPORT	EACH	2			2	
6	2104 603	SAVING CONCRETE PAVEMENT - FULL DEPTH	LN FT	15			15	
7	2104 603	SAVING BITUMINOUS PAVEMENT - FULL DEPTH	LN FT	374			258	
8	2104 603	REMOVE SEWER PIPE (STORM)	LN FT	15			15	
9	2104 604	REMOVE CONCRETE PAVEMENT	SG YD	2			2	
10	2104 604	REMOVE BITUMINOUS PAVEMENT	SG YD	135			91	
11	2106 507	EXCAVATION - COMMON	CU YD	23			14	
12	2211 607	STOCKPILE AGGREGATE	CU YD	9			38	
13	2211 609	AGGREGATE BASE CLASS 5	TON	73			40	
14	2257 606	BITUMINOUS MATERIAL FOR TACK COAT	GALLON	8			8	
15	2360 604	TYPE SP 9.5 WEARING COURSE MIXTURE (2.5) 2.5" THICK	SG YD	28			28	
16	2360 609	TYPE SP 9.5 WEARING COURSE MIXTURE (2.5)	TON	9			9	
17	2360 609	TYPE SP 12.5 NON WEARING COURSE MIXTURE (2.5)	TON	9			9	
18	2803 603	12" RC PIPE SEWER DESIGN 3008 CLASS V	LN FT	106			106	
19	2803 602	CONNECT TO EXISTING STORM SEWER	EACH	1			1	
20	2506 602	CASTING ASSEMBLY	EACH	1			1	
21	2506 603	INSTALL CASTING	EACH	1			1	
22	2506 603	CONSTRUCT DRAINAGE STRUCTURE DESIGN 48-600	LN FT	11.2			11.2	
23	2521 518	4" CONCRETE WALK	SG FT	45			18	
24	2521 602	DRILL AND GROUT DOVE BAR (EPOXY COATED)	EACH	4			4	
25	2531 603	CONCRETE CURB AND OUTLET DESIGN SPECIAL	LN FT	368			220	
26	2540 602	INSTALL MAIL BOX SUPPORT	EACH	2			2	
27	2540 601	TRAFFIC CONTROL	LUMP SUM	1	0.50		0.50	
28	2554 602	INSTALL SIGN	EACH	1			1.00	
29	2572 603	TEMPORARY FENCE	LN FT	100			100	
30	2573 602	STORM DRAIN INLET PROTECTION	EACH	2			2	
31	2573 603	SEDIMENT CONTROL LOG TYPE STRAW	LN FT	234			185	
32	2574 607	SEEDING TOPSOIL BERM/ROW	CU YD	32			22	
33	2575 601	TURF ESTABLISHMENT	LUMP SUM	1	0.50		0.50	

BASIS OF ESTIMATED QUANTITIES	
AGGREGATE BASE CLASS 5	100 lbs/sq yd
NON WEARING BITUMINOUS COURSE MIXTURE	110 lbs/sq yd
WEARING COURSE BITUMINOUS MIXTURE	110 lbs/sq yd
BITUMINOUS MATERIAL FOR TACK COAT - NEW ASPHALT	0.08 gal/sq yd
BITUMINOUS MATERIAL FOR TACK COAT - OLD ASPHALT	0.07 gal/sq yd
BITUMINOUS MATERIAL FOR TACK COAT - MILLED ASPHALT	0.08 gal/sq yd
HYDRAULIC FIBER BONDED MATRIX	3500 lbs/acre
SEED MIX SOUTHERN BOUTEVAR	320 lbs/acre
TYPE 1 COMMERCIAL FERTILIZER	300 lbs/acre

STANDARD PLATES	
THESE STANDARD PLATES AS APPROVED BY THE FHWA SHALL APPLY	
PLATE NO.	DESCRIPTION
3000M	REINFORCED CONCRETE PIPE (6 SHEETS)
3006H	GASKET JOINT FOR R.C. PIPE (2 SHEETS)
3007F	SHEAR REINFORCEMENT FOR PRECAST DRAINAGE STRUCTURES
4011E	PRECAST CONCRETE BASE
4020J	MANHOLE OR CATCH BASIN
4026B	(FOR USE WITH OR WITHOUT TRAFFIC LOADS) (2 SHEETS)
4105F	CONCRETE ENCASED CONCRETE ADJUSTING RINGS
4106F	ADJUSTING RINGS FOR CATCH BASINS AND MANHOLES
4106F	COVER CASTING FOR MANHOLES
4180J	MANHOLE OR CATCH BASIN STEP

DATE	REVISION

I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the State of Minnesota.

Signature: *[Signature]* Date: 5/15/25

Print Name: E. J. Anderson, P.E. License No. 61933



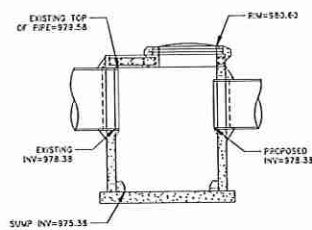
Hokanson Anderson
Civil Engineers and Land Surveyors
3601 Truitt Ave., Ancker, Minnesota 55303
763-427-5550 FAX 763-427-0520
www.hokanson-anderson.com

2026 SANDY LAKE AND LAKE DIANN
IMPROVEMENT PROJECT

ESTIMATED QUANTITIES, LEGEND, AND
CONSTRUCTION NOTES
CITY OF BALDWIN, MINNESOTA

SHEET
2
9
5-0073
B0309

May 15, 2025 - 8:00am
C:\Users\janderson\OneDrive\Documents\2026 Sandy Lake and Lake Diann Improvement Project\2026 Sandy Lake and Lake Diann Improvement Project.dwg



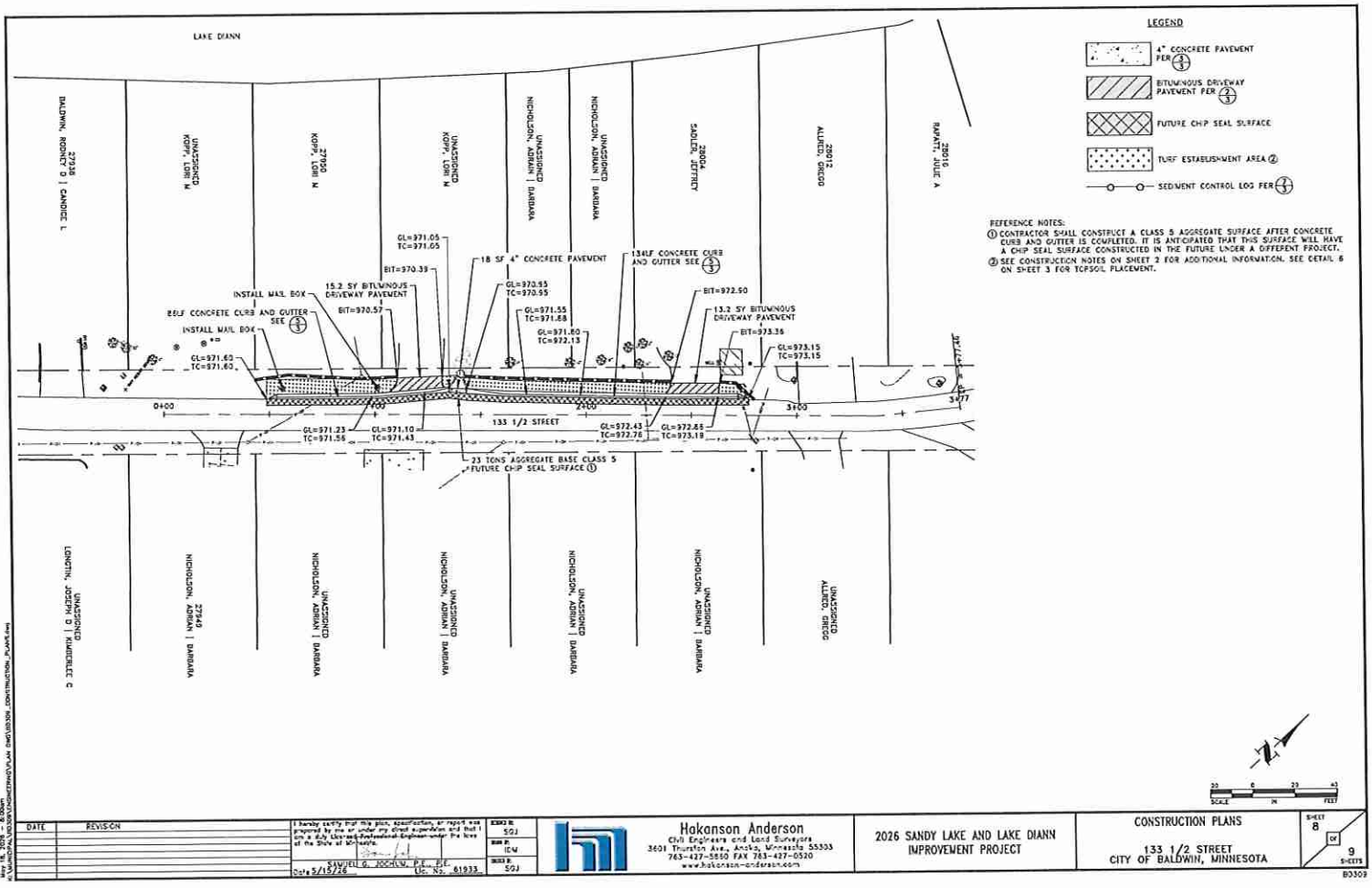
Technical drawing of a manhole structure showing various components and construction details. The drawing includes the following labels and dimensions:

- FRAME & CASTING AS INDICATED ON PLANS
- MAN-HOLE COVER SHALL BE TYPE B WITH 3" ECCENTRIC OPENING FOR HS 25 LOADING. (REF. M-DOT STD. PLATE 4200)
- CONCRETE ADJUSTING PINS PER M/DOT STANDARD PLATE 4210
- ALL INTERIOR JOINTS SHALL BE GROUTED TO A SMOOTH FINISH EXISTING 12" CNP
- CONTRACTOR SHALL CONSTRUCT CONCRETE COLLAR AROUND OUTSIDE OF PIPE TO FILL ANULAR SPACE
- MANHOLE TO BE CONSTRUCTED OF PRECAST CONCRETE SECTIONS WITH WALL REINFORCEMENT
- PRECAST CONCRETE MANHOLE BASE PER M/DOT STANDARD PLATE 4011
- GROUT PERIMETER OF CASTING & ADJUSTING PINS WHEN CONCRETE RINGS ARE REQUIRED
- STEPS
- SEE M/DOT STANDARD PLATE 4250
- PROPOSED 12" RCP
- 48" R/A
- 12" CNP
- GROUT INVERTS

NAME:	SSJ
DATE:	10/1
TIME:	SSJ



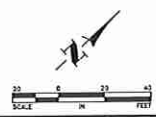
CITY OF BALDWIN, MINNESOTA



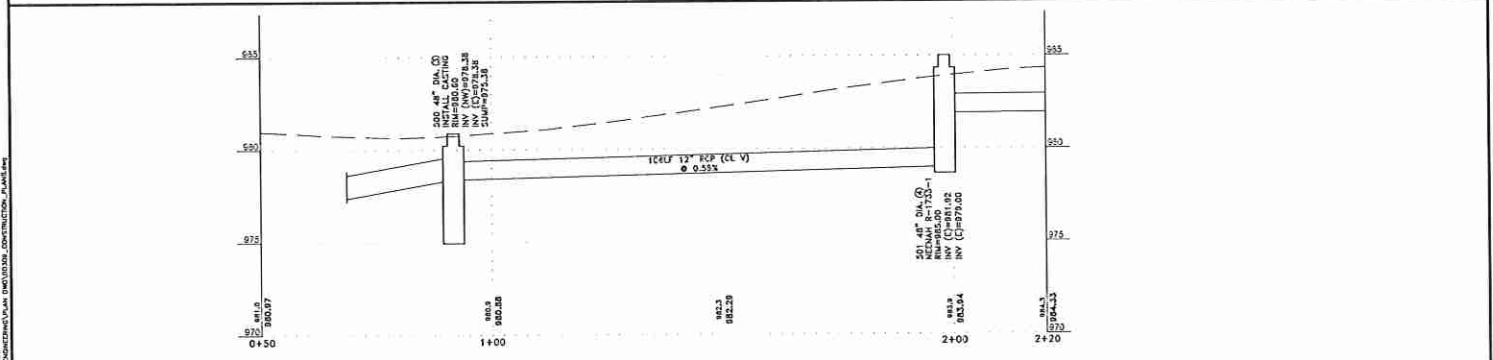
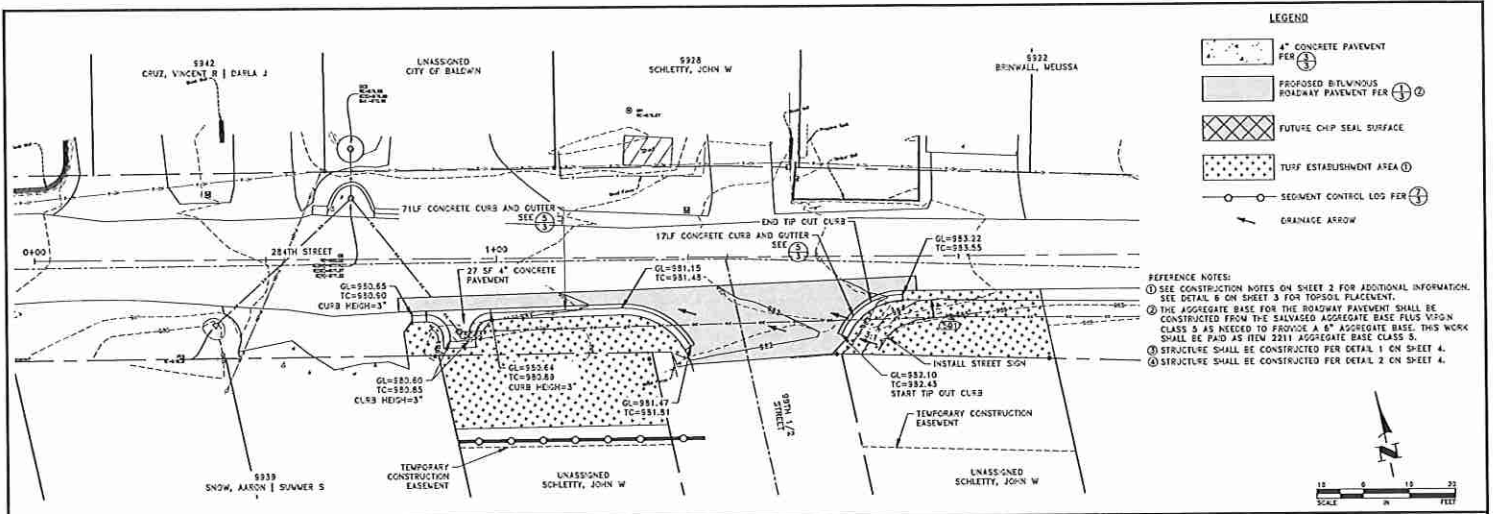
- LEGEND**
- 4" CONCRETE PAVEMENT PER ③
 - BITUMINOUS DRIVEWAY PAVEMENT PER ②
 - FUTURE CHIP SEAL SURFACE
 - TURF ESTABLISHMENT AREA ②
 - SEWAGE CONTROL LOG PER ①

REFERENCE NOTES:

- ① CONTRACTOR SHALL CONSTRUCT A CLASS 5 AGGREGATE SURFACE AFTER CONCRETE CURS AND GUTTER IS COMPLETED. IT IS ANTICIPATED THAT THIS SURFACE WILL HAVE A CHIP SEAL SURFACE CONSTRUCTED IN THE FUTURE UNDER A DIFFERENT PROJECT.
- ② SEE CONSTRUCTION NOTES ON SHEET 2 FOR ADDITIONAL INFORMATION. SEE DETAIL 6 ON SHEET 3 FOR TOPSOIL PLACEMENT.



DATE: _____ REVISION: _____ I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the State of Minnesota. SIGNED: <u>SAUEL G. JOCHIM, P.E.</u> DATE: <u>5/15/26</u> LIC. NO. <u>81933</u>		EX30 R SQ1 R4 R4 R4 R4	Hakanson Anderson Civil Engineers and Land Surveyors 3601 Thurston Ave., Ancker, Minnesota 55303 763-427-5850 FAX 763-427-0520 www.hakanson-anderson.com	2026 SANDY LAKE AND LAKE DIANN IMPROVEMENT PROJECT	CONSTRUCTION PLANS 133 1/2 STREET CITY OF BALDWIN, MINNESOTA	SHEET 8 OF 9 SHEETS B03509
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DATE	REVISION	DESCRIPTION	BY	CHECKED
05/15/2020	1	ISSUED FOR PERMIT	JAC	JAC

I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly licensed Professional Engineer under the laws of the State of Minnesota.

DATE: 5/15/2020
 ENGINEER: JACOB J. ANDERSON
 LICENSE NO.: 61933

Hakanson Anderson
 Civil Engineers and Land Surveyors
 3601 Thurston Ave., Anoka, Minnesota 55303
 763-427-5550 FAX 763-427-0500
 www.hakanson-anderson.com

2026 SANDY LAKE AND LAKE DIANN IMPROVEMENT PROJECT

CONSTRUCTION PLANS
 284TH STREET
 CITY OF BALDWIN, MINNESOTA

SHEET 9 OF 9
 9
 9
 9

TEMPORARY CONSTRUCTION EASEMENT

John W. Schletty, a single man, Grantor, for valuable consideration, receipt of which is hereby acknowledged, does hereby convey and warrant to the City of Baldwin, Sherburne County, a Minnesota municipal corporation, its successors and assigns, Grantee, for temporary construction purposes, the following described temporary construction easement until December 31, 2027 over, across and under real estate in the County of Sherburne, in the State of Minnesota, as legally described below and graphically depicted on attached Exhibit A for the Sandy Lake Project according to the plans and specifications on file with the City:

PROPOSED TEMPORARY EASEMENT DESCRIPTION: A temporary easement for construction purposes over, under, and across the Northerly 20.00 feet of Lot 14, Block 3, BIRCH ACRES, Isanti County, Minnesota. Said temporary easement to expire on December 31, 2027.

AND

PROPOSED TEMPORARY EASEMENT DESCRIPTION: A temporary easement for construction purposes over, under, and across the Northerly 20.00 feet of Lot 16, Block 4, BIRCH ACRES, Isanti County, Minnesota. Said temporary easement to expire on December 31, 2027.

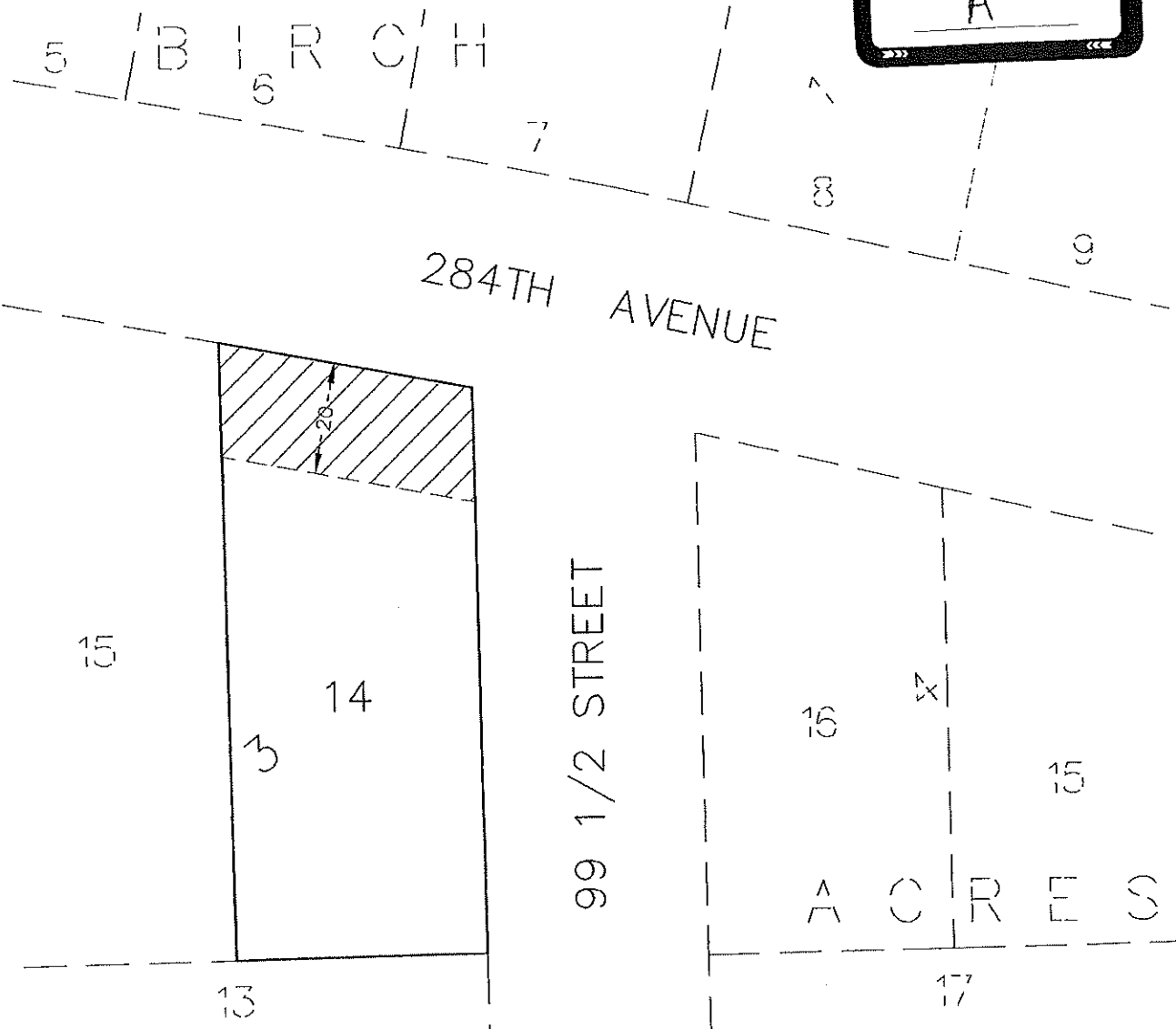
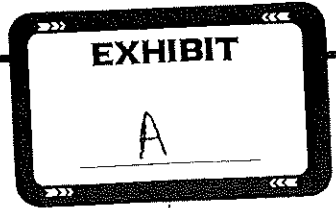
John W. Schletty

STATE OF MINNESOTA)
) s.s.
COUNTY OF SHERBURNE)

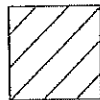
Subscribed and sworn to before me this _____ day of _____ 2026 by John W. Schletty.

Notary Public

This instrument was drafted by:
Couri & Ruppe, P.L.L.P.
705 Central Avenue East
PO Box 369
St. Michael, MN 66476-0369
Phone: (763) 497-1930



1 INCH = 30 FEET



DENOTES
PROPOSED
TEMPORARY
EASEMENT

Area of Proposed Temporary Easement is
923 Sq.Ft. = 0.02 Acres

PROPOSED TEMPORARY EASEMENT DESCRIPTION:

A temporary easement for construction purposes over, under, and across the
Northerly 20.00 feet of Lot 14, Block 3, BIRCH ACRES, Isanti County, Minnesota.

Said temporary easement to expire on December 31, 2027.

PROPERTY OWNER:

John Schletty

PID# 01-00407-0350

DATE	REVISION	DESIGNED BY BP	DRAWN BY JJ	CHECKED BY BP	Temporary Easement Exhibit for City of Baldwin		SHEET 1 OF 2
					DATE 05/12/2026	FILE NO. 80901-2026	SHEETS

5 / B I R C H

284TH AVENUE

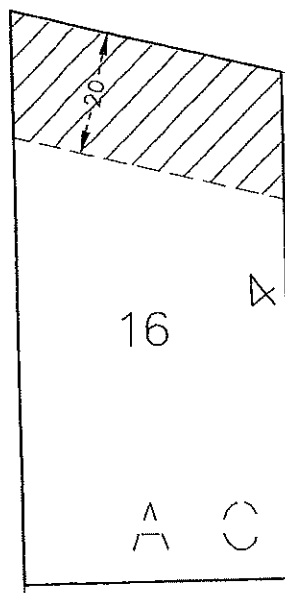
99 1/2 STREET

15

14

13

13



15

16

17

ACRES



1 INCH = 30 FEET



DENOTES
PROPOSED
TEMPORARY
EASEMENT

Area of Proposed Temporary Easement is
924 Sq.Ft. = 0.02 Acres

PROPOSED TEMPORARY EASEMENT DESCRIPTION:

A temporary easement for construction purposes over, under, and across the
Northerly 20.00 feet of Lot 16, Block 4, BIRCH ACRES, Isanti County, Minnesota.

Said temporary easement to expire on December 31, 2027.

PROPERTY OWNER:

John Schletty
PID# 01-00407-0450

DATE	REVISION	DESIGNED BY BP	CHECKED BY JJ	DATE BP	Temporary Easement Exhibit for City of Baldwin		SHEET 2 OF 2 SHEETS
					DATE 05/12/2026	FILE NO. BD901-2026	

Hakanson Anderson
Civil Engineers and Land Surveyors
3601 Thurston Ave., Anoka, Minnesota 55303
763-427-5850 www.haa-inc.com

PID# 01-00407-0350

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PID# 01-00407-0450

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**Hakanson
Anderson**

Main Office:
3601 Thurston Avenue, Anoka, MN 55303
Phone: 763/427-5860 Fax: 763/427-0520
www.haa-inc.com



May 18, 2026

Joan Heinen, City Clerk/Treasurer
City of Baldwin
30239 128th Street NW
Baldwin, MN 55371

RE: Hardy Homestead
City Acceptance and Financial Security Reduction

Dear Mrs. Heinen:

We have reviewed the status of the Hardy Homestead Development and have found the following:

1. All storm sewer has been installed and is substantially complete.
4. The aggregate base, bituminous non-wear, bituminous wear, and road shouldering have been constructed and are substantially complete.
5. The site grading and restoration is substantially complete. A few minor areas on the site still need to be restored and established with vegetation. Hakanson Anderson will work with the Developer to ensure these areas are fully restored during the warranty period.
6. We have received and reviewed the development as-built drawings and they have been approved.

Based on the status of the project as summarized above, we recommend that the City accept the Hardy Homestead development which would initiate the two year warranty period as described in the Development Agreement. We also recommend that the letter of credit be reduced to the 10% warranty amount of \$33,143.78. This amount will be held by the City until the end of the warranty period.

If you have any questions please call me at 763-852-0488.

Sincerely,
Hakanson Anderson

Sam Jochum, P.E., City Engineer

cc: Val Hardy, Developer

**CITY OF BALDWIN
SHERBURNE COUNTY
STATE OF MINNESOTA**

RESOLUTION NO. 26-15

**RESOLUTION ACCEPTING INFRASTRUCTURE IMPROVEMENTS, STARTING THE
WARRANTY PERIOD, AND REDUCTION OF THE LETTER OF CREDIT**

WHEREAS, Section 1B of the Development Agreement Hardy Homestead (“Agreement”) provides that the Developer warrants to the City for a period of two years from the date the City accepts by motion of the City Council the improvements, that all such improvements have been constructed to City standards and specifications for the entity requiring the improvement and shall suffer no significant impairments, either to the structure or the surface or other usable areas due to improper construction, said warranty to apply both to poor materials and faulty workmanship; and

WHEREAS, Section 4B.2 of the Agreement provides that the City shall retain the letter of credit or other security in the amount of at least 10% of the estimated construction cost of the Infrastructure Improvements and landscaping costs during the two-year warranty period; and

WHEREAS, the City has received a formal request from the Developer of Hardy Homestead to accept the infrastructure improvements, reduce the letter of credit to the 10% warranty amount, and to start the two year warranty period; and

WHEREAS, the City Engineer has inspected the infrastructure improvements for the Hardy Homestead development and has certified to the City that the installation of the infrastructure improvements for the development have been constructed according to the approved plans referenced in the Agreement.

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY
OF BALDWIN:**

1. The City hereby accepts the Hardy Homestead infrastructure improvements that pertain to the City and starts the two year warranty period as of the date of this Resolution.
2. The City will reduce the letter of credit to the warranty amount of \$33,143.78. This will be held until the end of the warranty period.

Passed this 20th day of May, 2026.

Jay Swanson
Mayor
City of Baldwin

Joan Heinen
Clerk/Treasurer
City of Baldwin



3527 Branch Rd
Princeton, MN 55371

Invoice

DATE	INVOICE #
5/12/2026	6156

BILL TO
City of Baldwin 30239 128th St Baldwin, MN 55371

TERMS	PROJECT NAME/ PO NUMBER
	278th Ave Culvert Ditch Grading 26

Description	Rate	Est Qty	Prior Qty	Curr Qty	U/M	Curr Billing
278th Avenue Culvert Ditch Grading						
1. Mobilization	2,000.00	1	0	1	LS	2,000.00
2. Clearing and Grubbing	7,500.00	1	0	1	LS	7,500.00
3. Excavation- Common (P)	200.00	8	0	8	CY	1,600.00
4. Site Restoration	7.00	170	0	170	SY	1,190.00

Thank You.	Sales Tax (7.375%)	\$0.00
	Total	\$12,290.00
We appreciate your prompt payment. Please remit a check to the above address or call our office at 763-389-2827 with any questions or concerns.	Payments/Credits	\$0.00
	Balance Due	\$12,290.00

CITY OF BALDWIN

05/18/26 1:28 PM

Page 1

602 Transactions

2026

April

Last Dim Descr	Search Name	Dr/Cr Amt	Comments
R Revenue			
Interest Earnings	Bremer Bank	-\$4.65	April 2026 Bank Interest
Late Payments Se	Frontier Trails	-\$127.89	UB Receipt Serv Pen 1 Frontier Trails
Sewer Charges	Frontier Trails	\$182.00	James Meyer Credit Card
Sewer Charges	Credit Card Payments	-\$186.00	James Meyer Credit Card
Sewer Charges	Frontier Trails	-\$5,274.11	UB Receipt Serv 1 Frontier Trails
Sewer Charges	Frontier Trails	\$186.00	James Meyer Credit Card
Sewer Charges	Credit Card Payments	-\$182.00	James Meyer Credit Card
Sewer Charges	Frontier Trails	\$186.00	James Meyer Credit Card
Sewer Charges	Credit Card Payments	-\$372.00	James Meyer Credit Card
Sewer Charges	Credit Card Payments	-\$186.00	James Meyer Credit Card
Sewer Charges	Credit Card Payments	-\$182.00	James Meyer Credit Card
R Revenue		-\$5,960.65	
G General Ledger			
Deferred Revenue	Frontier Trails	-\$858.00	UB UR Receipt Group 01 FRONTIER TRAILS
G General Ledger		-\$858.00	
E Expenditure			
Electric Utilities	Connexus Energy	\$472.75	Electric Utilities
Other Professional	Natural Systems Utilities	\$2,096.39	Frontier Trails SSD
Workers Compens	League of MN Cities P and C	\$49.20	Workers Comp Premium
E Expenditure		\$2,618.34	
		-\$4,200.31	

Revenue \$6818.65

CITY OF BALDWIN

*Cash Balances

Cash Account: 10100
April 2026

Fund	Begin April 2026	Receipts	Disbursements	Transfers		JE Payroll	Balance No		Investments	Balance
				Rec/Disb	Journal Entries		Investments			
10100 - Old National Bank										
101 - General Fund	(\$757,197.74)	\$28,947.06	(\$68,447.73)	\$0.00		(\$13,038.06)	(\$809,736.47)		\$0.00	(\$809,736.47)
225 - Cemetery Fund	\$7,913.38	\$4,301.14		\$0.00		(\$487.92)	\$11,726.60			\$11,726.60
250 - Fire Fund	\$65,204.69	\$1,048.61	(\$11,068.96)	\$0.00	\$26,405.30	(\$3,255.90)	\$78,333.74			\$78,333.74
275 - Street Capital	\$901,076.81	\$85.54	(\$20,852.83)	\$0.00			\$880,309.52			\$880,309.52
301 - G.O. 2017A	\$232,161.76	\$22.56		\$0.00			\$232,184.32			\$232,184.32
302 - G.O. 2024A	\$11,914.83	\$1.16		\$0.00			\$11,915.99			\$11,915.99
401 - Capital Project Fund	\$170,978.16	\$16.61		\$0.00			\$170,994.77			\$170,994.77
402 - Fire Services	\$20,380.69			\$0.00			(\$6,024.61)			(\$6,024.61)
403 - Fire Infrastructure Fund	\$255,781.39	\$24.86		\$0.00			\$255,806.25			\$255,806.25
404 - Parks Capital Fund	\$68,121.62	\$81.36	(\$356.62)	\$0.00			\$65,459.06			\$65,459.06
602 - Sewer Fund	\$43,683.96	\$6,818.65	(\$2,618.34)	\$0.00		(\$2,387.30)	\$47,884.27			\$47,884.27
801 - Developers Account - Escrow	\$195,588.26	\$3,860.00	(\$10,337.30)	\$0.00			\$189,110.96			\$189,110.96
802 - Baldwin Estates Escrow	\$2,389.61			\$0.00			\$2,389.61			\$2,389.61
804 - Buck Run Escrow	\$15,401.81			\$0.00			\$15,401.81			\$15,401.81
805 - Sumser Farms 1st Addt Escr	\$2,186.41			\$0.00			\$2,186.41			\$2,186.41
		YTD Amounts		MTD Amounts		Begin + YTD				
Begin	\$1,235,585.64	\$1,725,230.87	Investments	\$0.00		\$0.00				
Receipt	\$45,207.55	\$248,163.85	Petty Cash	\$0.00		\$0.00				
Disbursements	(\$113,681.78)	(\$689,108.37)	Savings	\$0.00		\$0.00				
Transfers Rec/Disb	\$0.00	\$0.00	Money Market	\$0.00		\$0.00				
Transfers JE	\$0.00	\$2.04								
JE Payroll	(\$19,169.18)	(\$136,346.16)	Balance	\$1,147,942.23	In Balance					

Frontier Trails Wastewater Operation Summary

Frequency

Pretreatment Module

Log pump run times and event counters	1 / month	☒ Completed	☐ Not Completed
Verify pumps are operational	1 / month	☒ Completed	☐ Not Completed
Perform amp draw and voltage checks	2 / month	☒ Completed	☐ Not Completed
Check for orifice plugging	2 / year	☐ Completed	☒ Not Completed
Verify open pipes in VFW to flush solids	4 / year	☐ Completed	☒ Not Completed
Check blower for proper operation	1 / month	☒ Completed	☐ Not Completed

Disposal System

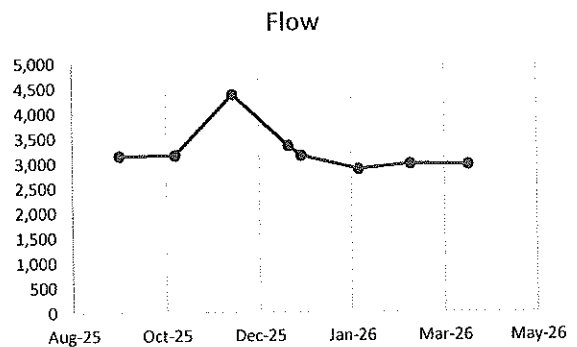
Sample effluent at WS007	4 / year	☐ Completed	☒ Not Completed
Visually inspect the drainfields	1 / month	☒ Completed	☐ Not Completed
Verify pumps are operational	2 / month	☒ Completed	☐ Not Completed
Turn pumps to hand to observe diverter operation at drainfields	2 / month	☒ Completed	☐ Not Completed
Sample wells at GW001-GW004 (Apr, July, Oct)	3 / year	☐ Completed	☒ Not Completed

Special Requirements

Home counts (Jun, Dec)	2 / year	☐ Completed	☒ Not Completed
------------------------	----------	------------------------------------	---

Monthly Flow Data

Current flow reading	2955	gpd
Previous flow reading	2974	gpd
Increase/decrease	-19	gpd



Comments

Site is operational

Future Maintenance Needs

Gophers and mixer trouble shoot

Date: 4/7/2026 4/16/2026 4/21/2026
Operator: GF JC JC

PERMITTEE
NAME/ADDRESS:
Baldwin Township
30239 128th St
Princeton, MN 55371

WASTEWATER TREATMENT
DISCHARGE MONITORING REPORT

PERMIT #	LIMIT STATUS	FORMER #
MN0064459		

MONITORING PERIOD	
YEAR MO DAY	YEAR MO DAY
2026-04-01	2026-04-30
FROM:	TO:

FACILITY NAME/ADDRESS:
Frontier Trails Septic Treatment System
unknown
Baldwin Township, MN 55371

STATION INFORMATION:
WS 001 (Influent Waste System #1)
Waste Stream

No Discharge/No Flow
(enter 'x' if no discharge/no flow occurred for this station):

PARAMETER	QUANTITY		UNITS	CONCENTRATION		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE		Exception
	SAMPLE VALUE PERMIT REQ	*****		*****	REPORT calendar month average			*****	Grab	
BOD, Carbonaceous 05 Day (20 Deg C) 80082		*****		*****	REPORT calendar month average	mg/L	twice per month	Grab		
Flow 50050		*****		*****	REPORT calendar month average	mgd	once per day	Measurement, Continuous		
pH 00400		*****		*****	REPORT calendar month average	mgd	once per day	Measurement, Continuous		
Precipitation 00193		*****		*****	REPORT calendar month total	mgd	twice per month	Grab		
Solids, Total Suspended (TSS) 00530		*****		*****	REPORT calendar month total	mg/L	twice per month	Grab		

COMMENTS:

PERMITTEE
NAME/ADDRESS:
Baldwin Township
30299 128th St
Princeton, MN 55371

WASTEWATER TREATMENT
DISCHARGE MONITORING REPORT

PERMIT #	LIMIT STATUS	FORMER #
MN0064459		

MONITORING PERIOD	
YEAR MO DAY	YEAR MO DAY
2026-04-01	2026-04-30
FROM:	TO:

FACILITY NAME/ADDRESS:
Frontier Trails Septic Treatment System
unknown
Baldwin Township, MN 55371

STATION INFORMATION:
WS 004 (Influent Waste System #2)
Waste Stream

No Discharge/No Flow
(enter 'x' if no discharge/no flow occurred for this station):

PARAMETER	QUANTITY		UNITS	CONCENTRATION		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE		Exception
	SAMPLE VALUE PERMIT REQ	*****		*****	26			*****	*****	
BOD, Carbonaceous 05 Day (20 Deg C) 80082		*****		*****	REPORT calendar month average	mg/L	twice per month	Grab		
		*****		*****			twice per month	Grab		
		*****		*****			once per day	Measurement, Continuous		
		*****		*****			once per day	Measurement, Continuous		
Flow 50050		*****		*****	.0026	mgd	once per day	Measurement, Continuous		
		*****		*****	0.00682		once per day	Measurement, Continuous		
		*****		*****	REPORT calendar month total		twice per month	Grab		
		*****		*****			twice per month	Grab		
pH 00400		*****		*****	7.23	SU	twice per month	Grab		
		*****		*****	REPORT calendar month minimum		twice per month	Grab		
		*****		*****			twice per month	Grab		
		*****		*****			twice per month	Grab		
Solids, Total Suspended (TSS) 00530		*****		*****	9.9	mg/L	twice per month	Grab		
		*****		*****	REPORT calendar month average		twice per month	Grab		
		*****		*****			twice per month	Grab		
		*****		*****			twice per month	Grab		

COMMENTS:

PERMITEE
NAME/ADDRESS:
Baldwin Township
30239 128th St
Princeton, MN 55371

WASTEWATER TREATMENT
DISCHARGE MONITORING REPORT

PERMIT #	LIMIT STATUS	FORMER #
MIN0064459	Phase 2	

MONITORING PERIOD			
YEAR	MO	DAY	
2025	04	01	
FROM:			
			TO:
2025	04	30	

FACILITY NAME/ADDRESS:
Frontier Trails Septic Treatment System
unknown
Baldwin Township, MN 55371

STATION INFORMATION:
W5007 (End of Pipe New Drainfield)
Waste Stream

No Discharge/No Flow
(Enter 'x' if no discharge/no flow occurred for this station):

PARAMETER		QUANTITY		UNITS	CONCENTRATION		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE	Exception
BOD, Carbonaceous 05 Day (20 Deg C) 80082	SAMPLE VALUE PERMIT	*****	*****		*****	382		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
	SAMPLE VALUE PERMIT	*****	*****		*****	652		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
Chloride, Total 00940	SAMPLE VALUE PERMIT	*****	*****		*****	0.145		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
	SAMPLE VALUE PERMIT	*****	*****		*****	6.87		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
Nitrite Plus Nitrate, Total (as N) 00630	SAMPLE VALUE PERMIT	*****	*****		*****	7		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
	SAMPLE VALUE PERMIT	*****	*****		*****	10.0		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
Nitrogen, Kjeldahl, Total 00625	SAMPLE VALUE PERMIT	*****	*****		*****	16		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
	SAMPLE VALUE PERMIT	*****	*****		*****	REPORT calendar month average		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
Nitrogen, Total (as N) 00600	SAMPLE VALUE PERMIT	*****	*****		*****	REPORT calendar month average		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
	SAMPLE VALUE PERMIT	*****	*****		*****	REPORT calendar month average		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
Solids, Total Suspended (TSS) 00530	SAMPLE VALUE PERMIT	*****	*****		*****	REPORT calendar month average		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	
	SAMPLE VALUE PERMIT	*****	*****		*****	REPORT calendar month average		twice per month	Grab	
	REQ					REPORT calendar month average		twice per month	Grab	



Natural Systems Utilities Work Order Request and Cost Estimate Form

Project	Frontier Trails	PM	Greg Flood
Date	4/13/2026	Phone	763-620-0706
Location	Baldwin Township	Email	gfflood@nsuwater.com

Description of Work

NSU will acquire, program, and install two remote monitoring devices. One device will be installed at the north site and another at the south. The north site will require external housing. South will be installed within the building. Each unit will be able to realtime monitor for alarms and function. Each unit will also have the ability to produce a daily flow as required by permit for WS004 and WS001. These units require a yearly subscription for wireless connectivity and realtime monitoring.

Cost Estimate

Labor	Rate (per hour)	Quantity	Subtotal
Operations Manager	\$210.00	0	\$0.00
Operations Supervisor	\$166.00	0	\$0.00
Project Engineer I	\$160.00	0	\$0.00
Lead Operator	\$155.00	20	\$3,100.00
Wastewater Operator	\$125.00	0	\$0.00
Expenses	Rate (per mile)	Quantity	Subtotal
Mileage	\$0.725	50	\$36.25
Other Operation Services	Rate	Quantity	Subtotal
Confined Space Entry (per permit)	\$100.00	0	\$0.00
Use of HAZMAT Monitoring Equipment (per hour)	\$50.00	0	\$0.00
Pressure Washer / Jetter Unit (per hour, 2 hour min.)	\$90.00	0	\$0.00
Rough Cut Mower (per hour)	\$50.00	0	\$0.00
Materials	Cost	Quantity	Subtotal
Omnite XR50 with External Housing	\$4,000.00	1	\$4,000.00
Omnisite XR50 interior	\$5,100.00	1	\$5,100.00
Additional Current Sensors (2)	\$400.00	1	\$400.00
Additional Electrical Supply	\$100.00	1	\$100.00
3 S-WS-OBXRCB-REALTIME1 Remote monitoring St	\$506.00	1	\$506.00
Subtotal			\$13,242.25
Contingency (10%)			\$1,324.23
Total			\$14,566.48

This document is intended as an estimate only, and may change based on unexpected or unforeseen issues, additional tax and/or shipping costs, etc. Work order authorization via email is acceptable. Please contact your Project Manager with questions.

Joan Heinen

From: Gregory Flood <gflood@nsuwater.com>
Sent: Monday, April 13, 2026 2:08 PM
To: Joan Heinen
Cc: Tyler Gagner; Joshua Carrier
Subject: RE: Chemical Leak and Required Service
Attachments: Frontier Trails Remote Telemetry.pdf

Hi Joan,

Attached is a work order estimating the cost of two remote telemetry units.

A few things:

1. The exterior XR50 for the north site on this work order is used. It was a device we implemented during a construction project.
 - a. It is already installed in a stainless-steel housing cabinet, with a heater for condensation remediation and winter warmth. It's fully functional and is in very good condition. We offer this as an option. If the Township wants a price for a new unit instead of our used option. The cost would be the price for the new unit; plus housing, heater etc. I can provide that if needed. I'd guess it would add another 4-5 thousand to the total cost if the Township decided to go all new.
2. An electrician will be needed to run power from the main source to these devices. I did not include that work in this work order as I didn't know if Baldwin has an electrician they already use. Once an electrician runs power from the main, NSU will handle the wiring to pumps and panel operations.
3. These devices are contingent on using the subscription service called "Guard Dog", Omnisites personal cloud network. The yearly cost of the subscription is listed at \$505 per device per year.
4. Typical wait time for these devices once ordered is around 3-4 weeks according to the manufacturer.

Feel free to reach out with any questions.

Best,
Greg



Greg Flood
Lead Operator – Central Region
Natural Systems Utilities
M: 1.763.620.0706
Aut Viam Ineniam Aut Facium

From: Joan Heinen <city.clerk@baldwinmn.gov>
Sent: Friday, April 10, 2026 8:06 AM
To: Gregory Flood <gflood@nsuwater.com>
Subject: RE: Chemical Leak and Required Service

Caution: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. If you are unsure, please contact IT.

Thank you, appreciate it very much.

Public Works Report – May 20th, 2026

Parks

- Young Park & Goose Lake Park – trash collection x4
- Young Park – Installation of Handicap signs
- Young Park - Installation of Split rail fence
- Young Park – ARC 1st application completed
- Young Park – Gophers trapped
- Sandy Lake Beach – Gate locked – Coordinate replacement information signage
- Elk Lake & Sandy Lake Beach– Setup Seasonal Restroom
- Elk Lake & Sandy Lake areas – 1st mow & spring cleanup – completed

Roads

- Total road patching material for 2026 season: U.P.M. & hot patch – 13 Tons
- 10 Hour OSHA training course – completed
- Installing City boundary signs
- Trees down in Roadway x3
- Sign repairs several areas
- Clearing stormwater basins
- Plow damage areas repaired

Cemetery

- Locate 5 burial plots

Trucks / Equipment

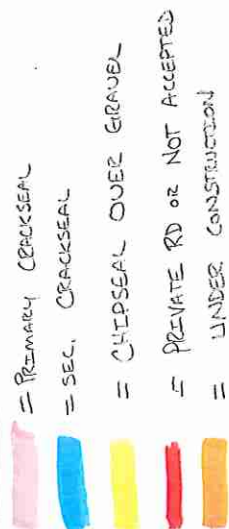
- Plate compactor leak repaired
- Service mowing equipment

Grounds

- Setup and coordinate Cleanup Day
- Clean & set up for school referendum voting
- Mowing

 = Map #1 (page 3)
 = Map #2 (page 4)
 = Map #3 (page 5)
 = Map #4 (page 6)

= Map #4 (page 6)





CITY OF BALDWIN
30239 — 128TH STREET NW
BALDWIN, MN 55371
TELEPHONE: (763) 389-8931
FAX: (763) 389-2751
RETURN TO:
CITY.CLERK@BALDWINMN.GOV

For Office Use Only

Permit # _____
Sent to Engineer _____
Initial Insp _____
Final Insp _____
Refund _____

PERMIT APPLICATION FOR ACCESS TO A CITY STREET

NOTE: A CITY PERMIT IS NOT REQUIRED FOR ACCESS OFF A COUNTY ROAD OR STATE HIGHWAY. CHECK WITH SHERBURNE COUNTY ZONING DEPARTMENT

NOTE: HEADWALLS ARE PROHIBITED

- Construction or reconstruction of any headwall within a right-of-way shall be prohibited.
- Applicant for the Access Permit is responsible for informing the home buyer that headwalls are not allowed.
- Driveways need to be completed before an occupancy permit is issued to comply with the Zoning Ordinance. If driveways cannot be completed due to winter weather or any other reason, a Construction Escrow Agreement will be required — no exceptions.
- PLEASE call City Hall to schedule an inspection when the driveway has been completed.

DRIVEWAY ACCESS FEE SCHEDULE

**** All fees required at time of application ****

Lots Platted After April 3, 2023	Cash	Check #	Receipt #	Date
\$15,600 Construction Escrow				
\$70 EMS Sign Fee				
All Other Lots & Unplatted Parcels	Cash	Check #	Receipt #	Date
\$10,700 Construction Escrow				
\$70 EMS Sign Fee				
First Access Permit	Cash	Check #	Receipt #	Date
\$200 Administration Fee				
\$100 Inspection Fee				
\$70 EMS Sign Fee				

**** If the work is not completed as outlined, costs incurred by the City to remove or complete the construction will be deducted from the Construction Escrow** NO ESCROW money will be refunded until the project is completed, inspected and in compliance with the Zoning Ordinance.**

PLEASE PRINT

Applicant Name: _____ Phone: _____ Email: _____

Address: (Street, City, Zip) _____

Property Owner: _____ Phone: _____ Email: _____

Address: (Street, City, Zip) _____

Proposed access location (Street Name) _____ miles/feet N-E-S-W of intersecting
Street (Name) _____

Legal Description: Located in _____ Quarter of Section _____ Township 35 Range 26 or

Located in Plat of (Name) _____ Lot _____ Block _____

Parcel Identification Number 01- _____ - _____

CITY OF BALDWIN
30239 — 128TH STREET NW
BALDWIN, MN 55371
TELEPHONE: (763) 389-8931
FAX: (763) 389-2751
RETURN TO: CITY.CLERK@BALDWINMN.GOV

Property Address _____

Access Purpose: _____ Residential _____ Commercial _____ Other _____

Number of present accesses _____

MORE THAN ONE DRIVEWAY ACCESS PER PROPERTY REQUIRES CITY COUNCIL APPROVAL

**ATTACH A SKETCH OF THE PROPERTY WHICH INCLUDES
PRESENT & PROPOSED ACCESSSES IN RELATION TO INTERSECTING STREETS**

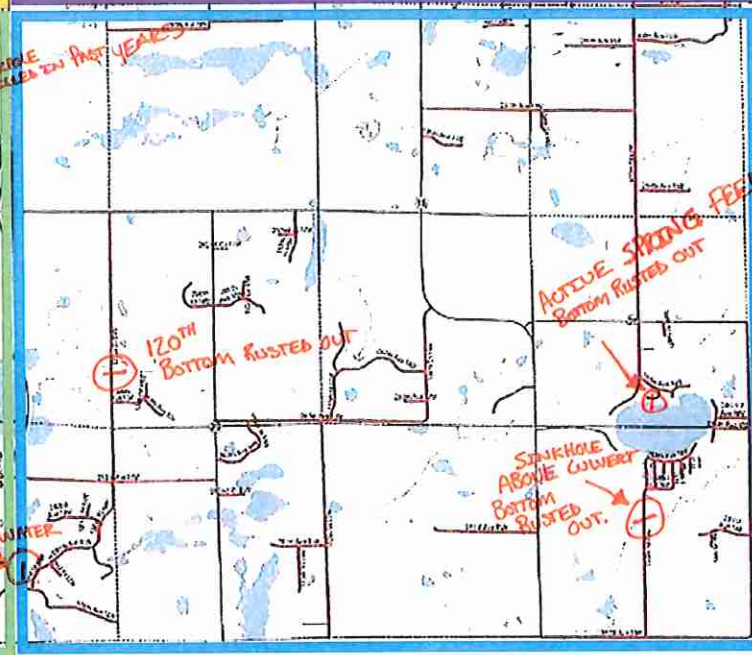
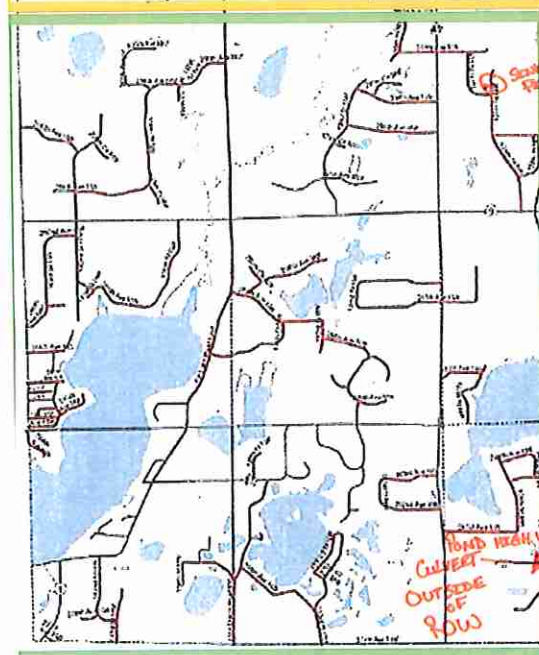
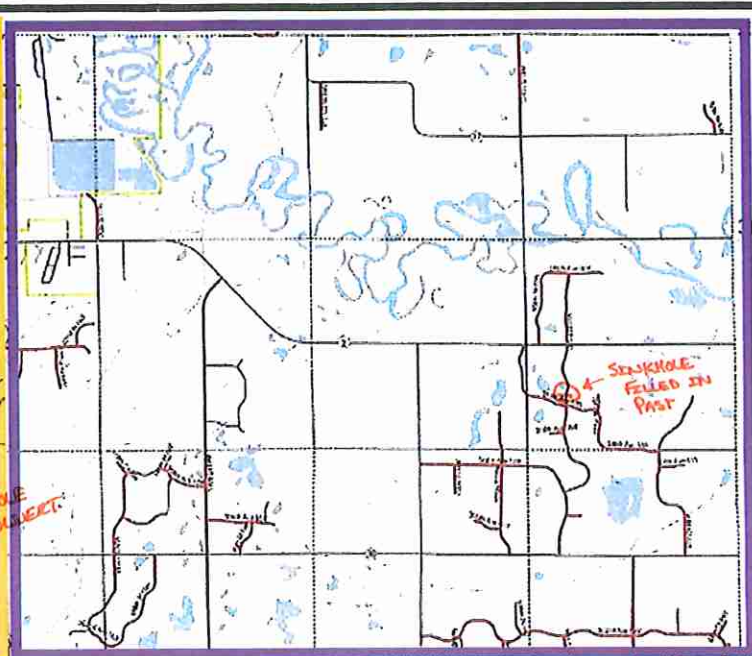
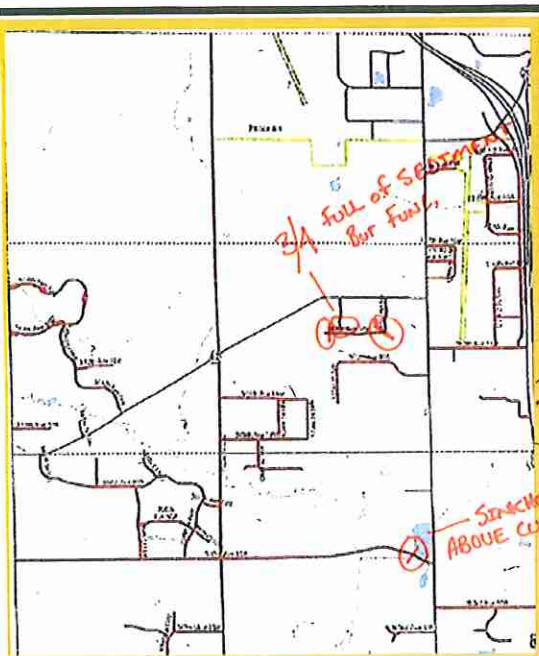
I (we) the undersigned, herewith make application for permission to construct the driveway access at the above location, said access to be constructed in conformance with current City Engineering Standards. It is further agreed that no work in connection with this application will be started until the application is approved and the permit issued. It is expressly understood that this permit is conditioned upon replacement or restoration of the City Street to its original condition. **Further**, I (we) the undersigned, have received a copy of current City Engineering Standards and Minnesota Statute 160.27 Particular uses of Right of Way; Subdivision 5, Misdemeanors.

Signed: _____

Name (Print) _____

Date: _____

Address: _____



Public Works Operational Purchasing Items (Within \$1,000 Limit Per- month)

Public Works Operational Purchasing – Pre-Approved Items Exhibit (A) Draft

Purpose

This exhibit is intended to provide clarification and operational guidance regarding routine Public Works purchases under the approved \$1,000 monthly purchasing authority. The intent is to allow timely purchase of common operational, maintenance, safety, and emergency-response items necessary to maintain day-to-day city operations without unnecessary delays.

This exhibit is intended to remain simple, practical, and focused on routine operational needs.

Pre-Approved Operational Purchase Categories

Regulatory Signs and Traffic Control

- Stop signs
 - Yield signs
 - Load limit signs
 - Children at Play signs
 - Other routine regulatory and warning signs
 - Signposts and mounting hardware
 - Round posts
 - Channel signposts
 - Channel ground posts
 - Sign mounting hardware and brackets
 - Maintain reasonable bench stock inventory levels for routine replacement needs
-

Fuels, Fluids, and Lubricants

- Gasoline
- Off-road diesel fuel
- DEF fluid
- Propane
- Bulk oils and lubricants
- Hydraulic oil
- Grease and related service fluids

Note: Gasoline, off-road diesel, and DEF purchases are considered essential operational restocking items and are recommended to be excluded from the \$1,000 monthly purchasing limit due to fluctuating fuel usage and pricing.

Winter Operations Materials

- Bulk road salt purchased through state CPV programs
- Traction sand from local vendors

Note: Salt & Sand purchases are considered essential operational restocking items and are recommended to be excluded from the \$1,000 monthly purchasing limit due to fluctuating usage and pricing

Public Works Operational Purchasing Items (Within \$1,000 Limit Per- month)

Parks and Recreational Area Consumables

- Grass seed
- Black dirt and topsoil
- Mulch
- Landscaping materials
- Fertilizer
- Erosion control materials
- Athletic field and park maintenance consumables
- Other routine park and grounds maintenance materials

Note: This category is intended to cover routine consumable materials necessary for maintaining city parks, recreational areas, green spaces, trails, and public grounds.

Shop Supplies and Consumables

- Shop towels and rags
 - Absorbents and spill control materials
 - Ground marking paint
 - Touch-up paint
 - Spray paint
 - Fasteners and hardware
 - PPE and safety equipment including:
 - Gloves
 - Safety glasses
 - Hearing protection
 - Hard hats
 - High-visibility clothing
 - Winter safety gear
 - Chainsaw chaps/pants and chainsaw boots
 - Small hand tools
 - Routine wear items including:
 - Drill bits
 - Cutoff wheels
 - Sawzall blades
 - Grinding discs
-

Equipment Maintenance and Repair Items

- Equipment fluids and filters
- Lawn mower blades
 - Recommended bench stock of approximately two replacement sets per machine
- Replacement deck spindles
- Mower tires
- Sweeper replacement waffles

Public Works Operational Purchasing Items (Within \$1,000 Limit Per- month)

- Restroom plumbing repair hardware
 - Chainsaw chains
 - Recommended bench stock of approximately two spare chains per saw
 - Routine repair parts and wear components necessary to maintain operational equipment
-

Hydraulic Systems

- Hydraulic hose replacement
- Hydraulic fittings
- Outside vendor hydraulic ram seal rebuilds when necessary

Note: Internal hydraulic ram rebuilds are not intended to be completed in-house.

Operational Intent

The intent of this exhibit is to support efficient daily operations, reduce unnecessary administrative delays for routine maintenance needs, maintain appropriate safety standards, and allow Public Works staff to respond to operational needs in a timely manner while remaining within Council-established purchasing authority.

This exhibit is not intended to authorize large capital purchases, major equipment acquisitions, or non-routine expenditures outside normal operational maintenance activities.

**CITY OF BALDWIN
SHERBURNE COUNTY
STATE OF MINNESOTA**

RESOLUTION NO. 26-04

**RESOLUTION DELEGATING AUTHORITY TO CERTAIN CITY
OFFICIALS TO ENTER INTO CERTAIN CONTRACTS**

WHEREAS, Minn. Stat. § 412.271, subd. 8 states that a City Council may delegate its authority for entering into certain contracts and paying certain claims against the City to certain City Officials subject to certain criteria; and

WHEREAS, the prerequisite criteria for delegating this authority have all be met by the City of Baldwin through the following: (i) City's internal accounting and administrative procedures, (ii) regular review of expenditure list by the City Council at each meeting, and (iii) preparation of an annual audited financial statement attested by an independent certified public accountant; and

WHEREAS, the City Council has designated certain members as the Public Works Liaison #1 and the Fire Chief, hereinafter "City Officials"; and

WHEREAS, all checks drawn for payment of claims must be signed by the City Clerk-Treasurer and the Mayor; and

WHEREAS, the City Clerk-Treasurer will present to the City Council at the regular City Council meetings a Claims List of all actions taken by City Officials pursuant to this Resolution; and

WHEREAS, procurement of goods and services are made under the authority granted in this purchasing policy, City Council-approved resolutions and/or applicable state statutes.

NOW, THEREFORE, BE IT RESOLVED by the City of Baldwin City Council as follows:

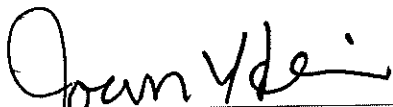
1. **Purchases up to \$2,500 for Goods and Services for the Fire Department:** The Fire Chief for the City of Baldwin is authorized to enter into and execute agreement with individuals, firms and corporations to provide goods and services for the City's Fire Department in an amount not to exceed \$2,500 per month without obtaining the prior approval of the City Council.

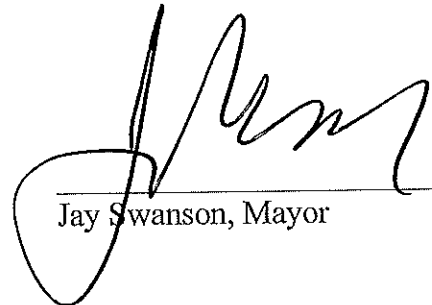
2. **Purchases up to \$2,000 for Replenishment of Supplies for the Public Works Department:** The Public Works Liaison #1 for the City of Baldwin is authorized to purchase supplies and other routine maintenance items necessary for the good working order of the Public Works Department in an amount not to exceed \$2,000 per month without obtaining the prior approval of the City Council. Supply List for Public Works attached as Exhibit A.
3. **Purchases up to \$2,500 for a Change Order/Work Order for Public Works/Road Projects:** The Public Works Liaison #1, in consultation with the City Engineer, is authorized to approve a "Change Order" or "Work Order" for a Public Works/Road Project previously approved by the City Council in an amount not to exceed \$2,500 per month without obtaining the prior approval of the City Council.
4. **Purchases up to \$2,500 for an Emergency by Public Works Liaison #1 and \$1,000 for all other City Council Members:** Public Works Liaison #1 is authorized to make purchases or enter into contracts during emergencies necessary to alleviate the emergency in an amount not to exceed \$2,500 per month without obtaining the prior approval of the City Council. All other Council members are authorized to make purchases or enter into contracts during emergencies necessary to alleviate the emergency in an amount not to exceed \$1,000 per month without obtaining the prior approval of the City Council. An emergency must be a situation arising suddenly and unexpectedly that requires speedy action essential to preserve the health, safety and welfare of the community, and not just an inconvenience. An emergency exists when a breakdown in machinery and/or a threatened termination of essential services or a dangerous condition develops, or when any unforeseen circumstances arise causing curtailment of an essential service.
5. **Purchases up to \$250 for Office Supplies:** the City Clerk-Treasurer is authorized to make purchases or enter into contracts for office supplies in an amount not to exceed \$250 per month without obtaining the prior approval of the City Council.
6. **Compliance with Minnesota Law:** All City Officials acting pursuant to the terms of this Resolution shall comply with the provisions of the Uniform Municipal Contracting Law, Minn. Stat. § 471.35.
7. **Documentation:** All City Officials acting pursuant to the terms of this Resolution shall inform the City Clerk-Treasurer of any actions taken pursuant to this Resolution. Specifically, all payments or authorizations under this Resolution shall be summarized by the City Clerk-Treasurer within a Claims List that will be presented to the City Council at their next regularly scheduled meeting. A copy of the invoice or receipt for payment must be included with the Claims List to verify

the amount of the expenditure and shall be provided to the City Clerk for inclusion with the next regular meeting's agenda packet and proper account coding. Receipts from vendors must identify all products or services purchased, shipping charges, and sales tax. A printed confirmation of an internet purchase may be sufficient to comply with this requirement. If an invoice is not immediately available, the invoice must be provided to the City Clerk-Treasurer when it becomes available.

8. **Review by City Council:** The City Council shall be responsible for reviewing the Claims List and verifying the validity of the expenditures and compliance with this Resolution as part of the Consent Agenda.
9. **Review of Documents:** Contracts and other documents entered into pursuant to this Resolution shall be available for review and inspection by any member of the City Council at any time upon reasonable request.
10. **Unauthorized Expenditures:** All City Officials acting pursuant to the terms of this Resolution shall be required to reimburse the City for any purchases not in compliance with the terms of is Resolution.

Adopted this 18th day of March, 2026.


Joan Heinen, Clerk


Jay Swanson, Mayor



Save the Date

SWCD Tour of Conservation Practices

June

18

SWCD Tour of Practices
Thursday, June 18th

Join us for our annual conservation tour featuring innovative practices in action! Lunch and transportation provided. More information to come.

Joan Heinen

From: Frances Gerde <fgerde@sherburneswcd.org>
Sent: Friday, April 17, 2026 10:31 AM
To: Joan Heinen
Subject: SWCD Tour of Practices
Attachments: toursavethedate26.jpg

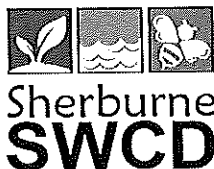
Hello Joan,

We are in the process of finalizing details for our annual tour of practices, and we would like to feature one of the Baldwin stormwater projects as a tour stop. At this point, the Sandy Lake project is the most likely location.

I wanted to share this with you in advance so you can get the date on your calendar. Dan and I would welcome the opportunity for Baldwin staff to join us on-site and speak about how the project came together.

You will receive the official invitation once it is sent out in the next few weeks. In the meantime, please let me know if there are any concerns with using the Sandy Lake site as a tour stop or if you have any questions before we send out more detailed information. Thanks Joan!

Have a great weekend!



Franny Gerde
Urban Conservationist

fgerde@sherburneswcd.org
763-220-3434 x 104

Sherburne Soil & Water Conservation District
425 Jackson Ave NW
Elk River, MN 55330
763-220-3434
www.sherburneswcd.org



Proposal:

City of Baldwin Assessment Contract

Submitted By:

Jake Stenzel

Submitted To:

Baldwin City Council

ATTN: City Council

30238 128th St. Baldwin, MN 55371

(763) 389-8931

5-06-26

Baldwin City Council

30238 128th Street

Baldwin, MN 55371

RE: Assessment Contract Proposal

Dear Baldwin City Council Members,

Thank you for considering Jake Stenzel to fulfill your future assessing needs. I am excited to provide you with premium assessing services at an affordable rate. We will strive

to:

- ☐ Create an equitable, uniform, and fair assessment.
- ☐ Answer stakeholder questions in a knowledgeable and respectful manner.
- ☐ Create a unique value proposition for the taxpayers of Baldwin Township by offering premium assessing services at an affordable rate.

I am versed in all assessment practices and procedures. I believe that open, honest, and collaborative conversations lead to the best results. I am anticipating having multiple conversations between the Sherburne County Assessor's Office, the Baldwin City Council, and our firm to find a solution that benefits everyone, especially the residents and taxpayers of the City of Baldwin.

I am pleased to submit the following proposal and are happy to answer any questions the City Council may have.

Sincerely,

Jake Stenzel

Scope of Work

- ☐ Revalue each property annually as of January 2nd
- ☐ Hold and conduct the annual Local Board of Appeal and Equalization meeting
(LBAE)
- ☐ Answer questions and inspect properties for the LBAE meeting
- ☐ Verify and qualify residential and commercial sales for the annual state sales study
 - ☐ Inspect and verify construction permits annually
 - ☐ Add new construction values to the annual assessment roll
- ☐ Report findings to the Local Board members for all appealed properties
 - ☐ Perform the annual quintile
- ☐ Inspect properties as requested by property owners
- ☐ Coordinate with the Sherburne County Assessor's office to ensure a successful
assessment
- ☐ Respond to questions from property owners in a knowledgeable and respectful
manner
- ☐ Respond to questions from the City Council in a knowledgeable and respectful
manner

Cost of Services

Total Annual Cost for Services Performed.....\$42,500

6.5% Increase per year on a 5-year contract that starts June 1st 2027 expires May 31st of
2032

Payment Schedule

Year	Total Due	February	May	June	November
2027/2028	\$42,500.00	\$5,000	\$5,000	\$27,500.00	\$5,000
2028/2029	\$45,262.50	\$5,000	\$5,000	\$30,262.50	\$5,000
2029/2030	\$48,204.56	\$5,000	\$5,000	\$33,204.56	\$5,000
2030/2031	\$51,337.86	\$5,000	\$5,000	\$36,337.86	\$5,000
2031/2032	\$54,674.82	\$5,000	\$5,000	\$39,673.82	\$5,000



Joan Heinen
City of Baldwin / Group #: 38951
30239 128th St NW
Princeton, MN 55371-3752

BROKER:

Todd Stead / 612-414-0200
tstead@ifcnationalmarketing.com

EMPLOYER PORTAL DELEGATE:

Joan Heinen
city.clerk@baldwinmn.gov

Currently Pay \$3708.⁹⁶
Renewal Amount \$4272.³⁸
Increase \$463.42

Dear Joan,

Thank you for choosing us as your partner for good. We know you trust us to provide a health plan that supports your goals, while providing the best value. With this in mind, we carefully review your plan benefits each year to make sure you get the most savings possible while your employees still get the coverage they need. And we continually evolve our product offerings to make sure they meet our uncompromising standards for quality and affordability on your behalf. As a result, your plan may have some changes as we remain focused on balancing coverage and costs.

Our team is here to help you navigate your renewal and provide ideas on how to extend services beyond your plan design. In this packet, you'll find all the information you need for your Medical insurance effective 08/01/2026. It includes:

- **Renewal Guide** – Outlines what's needed to successfully complete your renewal
- **Value Added Benefits** – An overview of resources included with your plan that are available to your employees
- **Next year's plan premiums** – Rates for your renewing plans
- **Benefit Change Exhibit** – Lists changes for next year
- **Summary of Benefits and Coverage (SBC)** – Overview of proposed renewing plans

Tools and resources for healthy living

Your plan includes tools and resources to help your employees maintain and improve their health—like our Employee Assistance Program, digital Living Well resources, and coverage for pediatric dental care. Check out our Value Added Benefits flyer to learn more.

Don't forget, if you'd like to change your plan(s) for 08/01/2026, let me know or have your broker contact me by 07/01/2026. Otherwise, we'll enroll your covered employees in the proposed plan(s).

Have questions?

Contact me or your broker directly. Thank you for partnering with us to provide care and coverage for your employees.

Sincerely,

Amy Stenger
Account Manager
Phone: 1-952-883-5235 or 800-298-4235
Fax: 952-853-8715
Email: Amy.B.Stenger@HealthPartners.Com

Save up to 25 percent
on your dental family plan when
you pair with a HealthPartners
fully insured medical plan.



Small Employer Renewal Regulatory Information

Definitions

Taxes & Assessments	Premiums include taxes and assessments for the amounts that HealthPartners must provide to State and Federal governments to fund health care programs for low-income residents (Medicaid), state premium taxes, state mandated minimum reserve requirements, and Affordable Care Act (ACA) related taxes.
General Administration	HealthPartners administrative charges include claims processing, member services, contract set up and administration, billing, internal marketing and distribution, information systems, and other general administrative fees. It also includes a broker service fee per employee per month and any costs associated with all other bonus payment or incentive programs for which a broker may be eligible.
Rating	Small Employer rates are calculated based on a single risk pool. Member premium may vary based on the benefit plan, family size, age and rating area. HealthPartners charges premium for up to three dependents under age 21, regardless of family size. Upon renewal, premiums will be adjusted for age, calculated as the age at renewal. This renewal of coverage is made with the understanding that the employer qualifies as a small employer under state and federal law and meets the HealthPartners participation and contribution requirements as outlined in the Master Group Contract or Group Policy. Should information be received that proves the employer was not a small employer at the time of renewal, or due to demographic changes the employer did not meet minimum participation at the time of renewal, HealthPartners reserves the right to re-evaluate this renewal proposal to the extent permissible under state and federal law.
Medicare Secondary Payer (MSP)	The Federal Government through the Centers for Medicare and Medicaid Services (CMS) requires health plans to gather and provide certain information about commercial groups and their employees. As part of the Medicare Secondary Payer (MSP) mandate, HealthPartners must gather the total number of employees for each employer. Medicare defines group size as the total number of employees within an employer's family of companies. HealthPartners will report group size by the following categories: • 1 to 19 employees • 20 to 99 employees • 100+ employees An employer's number of employees affects whether the health plan or Medicare pays primary for medical claims. It will impact claims payment for employees. Medicare defines the 20+ employees threshold as met if the employer employed 20 or more people on every working day of at least 20 weeks of the current or previous year. To report a change from one group size category to another please go to www.healthpartners.com/msp You do not need to report any group size changes that do not result in a change in the group size category.
Creditable Coverage	The Centers for Medicare and Medicaid Services requires that a notice be sent each year to Medicare eligible policyholders enrolled in a group plan that includes prescription drug coverage. Refer to healthpartners.com/creditable-coverage for creditable coverage determination method and details.



Group information

Group name: City of Baldwin

Group number: 38951

Renewal plan information

Renewal date: 08/01/2026

Benefits administration: Plan Yr w/o 4th Qtr Carryover

For the upcoming renewal year, your group plan(s) are set to be automatically renewed. Here are the details.

Your 2026 plans	Network	Area	Estimated annual premium*
\$4000-\$50 Gold SE	Open Access	MN-8	\$51,268.56

*The estimated annual premium is calculated based on current enrollment data for your medical plan(s).

Renewal alternate plan signature

If you wish to make any changes, we've also provided information on the alternate plans and networks available based on your company's location. Carefully review the plan pairing guidelines. Feel free to reach out to your broker or account manager for further details.

To renew on an alternate plan(s), complete the following information and return this signature page to SalesClientService@HealthPartners.Com no later than 7/1/2026. You will receive a confirmation email, once the request has been received.

Plan name	Network

Name: _____

Signature: _____

Date: _____

☐ Employer☐ Broker



Renewal plan rate information

Group information

Group name: City of Baldwin
Rate area: MN-8
County: Sherburne
State: MN

Group number: 38951
MSP number of employees: 3
MSP effective date: 07/17/2024

Renewal plan rate information

Renewal date: 08/01/2026
Benefit administration: Plan Yr w/o 4th Qtr Carryover

Your coverage will be renewed with the \$4000-\$50 Gold SE plan and the Open Access network unless we hear from you prior to 07/01/2026.

	Current plan	Renewal plan
Plan name:	\$4000-\$40 Gold SE	\$4000-\$50 Gold SE
Network:	Open Access	Open Access
Creditable coverage:	Yes	Yes
Change from current plan:		12.56%

Monthly Rates

Age	Current	Renewal
0-17	\$420.56	\$473.41
18	\$420.56	\$473.41
19	\$420.56	\$473.41
20	\$420.56	\$473.41
21	\$472.54	\$531.92
22	\$472.54	\$531.92
23	\$472.54	\$531.92
24	\$472.54	\$531.92
25	\$474.43	\$534.05
26	\$483.88	\$544.69
27	\$495.22	\$557.45
28	\$513.65	\$578.20
29	\$528.77	\$595.22
30	\$536.33	\$603.73
31	\$547.67	\$616.50
32	\$559.01	\$629.26
33	\$566.10	\$637.24
34	\$573.66	\$645.75
35	\$577.44	\$650.01
36	\$581.22	\$654.26
37	\$585.00	\$658.52
38	\$588.78	\$662.77
39	\$596.35	\$671.28
40	\$603.91	\$679.79
41	\$615.25	\$692.56

Age	Current	Renewal
42	\$626.12	\$704.79
43	\$641.24	\$721.82
44	\$660.14	\$743.09
45	\$682.35	\$768.09
46	\$708.81	\$797.88
47	\$738.58	\$831.39
48	\$772.60	\$869.69
49	\$806.15	\$907.46
50	\$843.96	\$950.01
51	\$881.29	\$992.03
52	\$922.40	\$1,038.31
53	\$963.98	\$1,085.12
54	\$1,008.87	\$1,135.65
55	\$1,053.76	\$1,186.18
56	\$1,102.44	\$1,240.97
57	\$1,151.58	\$1,296.29
58	\$1,204.03	\$1,355.33
59	\$1,230.02	\$1,384.59
60	\$1,282.47	\$1,443.63
61	\$1,327.84	\$1,494.70
62	\$1,357.61	\$1,528.21
63	\$1,394.94	\$1,570.23
64	\$1,417.62	\$1,595.76
65-115	\$1,417.62	\$1,595.76

- The change from current plan percentage is comparing the same age banded rate between the current and renewal plans. It doesn't encompass the overall monthly premium change.
- See Regulatory information page for rating requirements and Medicare Secondary Payer (MSP) details.



2026 Benefit Change Exhibit
Minnesota ACA
Small Employer Fully Insured

DOLLAR-LIMIT CHANGES

Actual deductible and out-of-pocket amounts vary by plan but must stay within these limits for the new plan year.

MAXIMUM OUT-OF-POCKET LIMITS IN-NETWORK		
Scope	2025 Limit	2026 Limit
☒ Non-HSA plans	• \$9,200 for self-only coverage • \$18,400 for family coverage	• \$10,600 for self-only coverage • \$21,200 for family coverage
☒ HSA plans	• \$8,300 for self-only coverage • \$16,600 for family coverage	• \$8,500 for self-only coverage • \$17,000 for family coverage

Source: Centers for Medicare and Medicaid Services (CMS); Department of Health and Human Services (HHS); Internal Revenue Service (IRS)

MINIMUM DEDUCTIBLES IN QUALIFIED HIGH DEDUCTIBLE HEALTH PLANS (HDHP)		
Scope	2025 Limit	2026 Limit
☒ HSA Non-Embedded plans	• \$1,650 for self-only coverage • \$3,300 for family coverage	• \$1,700 for self-only coverage • \$3,400 for family coverage
☒ HSA Embedded plans	• \$3,300 for self-only coverage • \$6,600 for family coverage	• \$3,400 for self-only coverage • \$6,800 for family only coverage

Source: Internal Revenue Service (IRS)

MAXIMUM CONTRIBUTIONS TO HEALTH SAVINGS ACCOUNTS (HSA)		
Scope	2025 Limit	2026 Limit
☒ HSA	• \$4,300 for self-only coverage • \$8,550 for family coverage	• \$4,400 for self-only coverage • \$8,750 for family coverage

Source: Internal Revenue Service (IRS)

PLAN LEVEL BENEFIT CHANGES

Consult your plan documents for exact coverage terms.

EMERGENCY SERVICES RENDERED OUTSIDE THE UNITED STATES		
Scope	Current Benefit	New Benefit Upon renewal in 2026
☒ All plans	Covered at the corresponding in-network emergency care benefit.	Coverage level for Emergency Services received outside of the US or US Territories is 50% of the Charges incurred, after the Out-of-Network Deductible. Charges are based on the Usual and Customary Charge. Emergency Services received outside of the US or US Territories are subject to the Out-of-Network Out-of-Pocket Limit.

NON-EMERGENCY SERVICES RENDERED OUTSIDE THE UNITED STATES		
Scope	Current Benefit	New Benefit Upon renewal in 2026
☒ All plans	Covered	Coverage excluded

SPECIALTY DRUG INJECTIONS AND INFUSIONS ADMINISTERED BY A HEALTH CARE PROVIDER IN THE MEMBER'S HOME, IN-NETWORK		
Scope	Current Benefit	New Benefit Upon renewal in 2026
☒ All plans	Coverage varies and follows the Home Health – All Other Services benefit	Coverage follows plan deductible (if applicable) and coinsurance

VIRTUWELL VISITS		
Scope	Current Benefit	New Benefit Upon renewal in 2026
☒ All HSA qualified plans	Covered at 100% after deductible	No charge

Source: One Big Beautiful Bill Act (H.R. 1, 119th Congress)

INJECTIONS IN A PHYSICIAN'S OFFICE OR OUTPATIENT FACILITY, INCLUDING ALLERGY INJECTIONS, IN-NETWORK		
Scope	Current Benefit	New Benefit Upon renewal in 2026
☒ Deductible-Copay	Coverage varies and follows the Home Health – All Other Services benefit	Coverage follows plan deductible and coinsurance
☒ Deductible-Copay TieredChoice		

PRESCRIPTION DRUGS ON THE FORMULARY, IN-NETWORK			
Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ Copay-Coinsurance	Generic drugs	Low cost: \$5 copay	\$20 copay
		High cost: \$25 copay	
☒ Deductible-Copay	Preferred brand drugs	\$60 copay	\$75 copay
☒ Three for Free	Specialty drugs	20% coinsurance, not subject to deductible	Specialty generic: 20% coinsurance, not subject to deductible
☒ Deductible-Copay TieredChoice			Specialty brand: 30% coinsurance, not subject to deductible
☒ Three for Free TieredChoice	Orally administered chemotherapy drugs	20% coinsurance, not subject to deductible	30% coinsurance, not subject to deductible
☒ Three for Free			
☒ Deductible-Copay TieredChoice	Generic drugs	\$15 copay or \$30 copay	\$20 copay
☒ Rx Copay	Preferred brand drugs	\$50 copay or \$60 copay	\$75 copay
	Non-Preferred drugs	\$100 copay or \$125 copay	\$150 copay
	Specialty drugs	\$760 copay	Specialty generic: \$800 copay
	Orally administered chemotherapy drugs	\$760 copay	Specialty brand: \$845 copay
			\$845 copay

PLAN SPECIFIC BENEFIT CHANGES

Consult your plan documents for exact coverage terms.

DEDUCTIBLE-COPAY PLAN SPECIFIC CHANGES, IN-NETWORK			
Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$600-\$50 Deductible-Copay Gold	Orally administered chemotherapy drugs	20% coinsurance, not subject to deductible	30% coinsurance, not subject to deductible
☒ \$1000-\$50 Deductible-Copay Gold	Orally administered chemotherapy drugs	20% coinsurance, not subject to deductible	30% coinsurance, not subject to deductible
☒ \$2000-\$30 with Rx Copay Gold	Out-of-Pocket	Individual \$9,200 / Family \$18,400	Individual \$10,150 / Family \$20,300
☒ \$2000-\$50 Deductible-Copay Gold	Orally administered chemotherapy drugs	20% coinsurance, not subject to deductible	30% coinsurance, not subject to deductible
☒ \$3000-\$50 Deductible-Copay Gold <i>Modified from \$4000-40 Deductible Copay Gold</i>	Orally administered chemotherapy drugs	20% coinsurance, not subject to deductible	30% coinsurance, not subject to deductible
	Out-of-Pocket	Individual \$6,000 / Family \$12,000	Individual \$6,500 / Family \$13,000
	Office Visit	\$40 copay	\$50 copay
	Convenience	\$20 copay	\$25 copay
	Group Therapy	\$20 copay	\$25 copay
☒ \$4000-\$50 Deductible-Copay Gold <i>Modified from \$4000-40 Deductible Copay Gold</i>	Orally administered chemotherapy drugs	20% coinsurance, not subject to deductible	30% coinsurance, not subject to deductible
	Out-of-Pocket	Individual \$6,100 / Family \$12,200	Individual \$6,600 / Family \$13,200
☒ \$5000-\$80 with Rx Copay Silver	Out-of-Pocket	Individual \$9,200 / Family \$18,400	Individual \$10,150 / Family \$20,300
☒ \$6000-\$70 Deductible-Copay Silver	Orally administered chemotherapy drugs	20% coinsurance, not subject to deductible	30% coinsurance, not subject to deductible

THREE FOR FREE PLAN SPECIFIC CHANGES, IN-NETWORK			
Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$2000-70% Three for Free Gold	Out-of-Pocket	Individual \$6,500 / Family \$13,000	Individual \$7,500 / Family \$15,000
☒ \$5400-70% Three for Free Silver <i>Modified from \$5000-70% Three for Free Silver</i>	Deductible	Individual \$5,000 / Family \$15,000	Individual \$5,400 / Family \$16,200
	Out-of-Pocket	Individual \$8,200 / Family \$16,400	Individual \$10,150 / Family \$20,300

HSA NON-EMBEDDED PLAN SPECIFIC CHANGES, IN-NETWORK			
Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$2600-100% HSA Non-Embedded Gold <i>Modified from \$2400-100 HSA Non-Embedded Gold</i>	Deductible	Individual \$2,400 / Family \$4,800	Individual \$2,600 / Family \$5,200
	Out-of-Pocket	Individual \$2,400 / Family \$4,800	Individual \$2,600 / Family \$5,200
☒ \$4600-100% HSA Non-Embedded Silver <i>Modified from \$4500-100 HSA Non-Embedded Silver</i>	Deductible	Individual \$4,500 / Family \$9,000	Individual \$4,600 / Family \$9,200
	Out-of-Pocket	Individual \$4,500 / Family \$9,000	Individual \$4,600 / Family \$9,200

HSA EMBEDDED PLAN SPECIFIC CHANGES, IN-NETWORK

Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$3400-100% HSA Embedded Gold <i>Modified from \$3300-100 HSA Embedded Gold</i>	Deductible	Individual \$3,300 / Family \$6,600	Individual \$3,400 / Family \$6,800
	Out-of-Pocket	Individual \$3,300 / Family \$6,600	Individual \$3,400 / Family \$6,800
☒ \$4000-100% HSA Embedded Gold <i>Modified from \$3700-100 HSA Embedded Gold</i>	Deductible	Individual \$3,700 / Family \$7,400	Individual \$4,000 / Family \$8,000
	Out-of-Pocket	Individual \$3,700 / Family \$7,400	Individual \$4,000 / Family \$8,000
☒ \$5300-100% HSA Embedded Silver <i>Modified from \$5100-100 HSA Embedded Silver</i>	Deductible	Individual \$5,100 / Family \$10,200	Individual \$5,300 / Family \$10,600
	Out-of-Pocket	Individual \$5,100 / Family \$10,200	Individual \$5,300 / Family \$10,600
☒ \$6200-100% HSA Embedded Silver <i>Modified from \$6000-100 HSA Embedded Silver</i>	Deductible	Individual \$6,000 / Family \$12,000	Individual \$6,200 / Family \$12,400
	Out-of-Pocket	Individual \$6,000 / Family \$12,000	Individual \$6,200 / Family \$12,400
☒ \$7400-100% HSA Embedded Bronze <i>Modified from \$7100-100 HSA Embedded Bronze</i>	Deductible	Individual \$7,100 / Family \$14,200	Individual \$7,400 / Family \$14,800
	Out-of-Pocket	Individual \$7,100 / Family \$14,200	Individual \$7,400 / Family \$14,800

HSA PLUS NON-EMBEDDED PLAN SPECIFIC CHANGES, IN-NETWORK

Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$2700-100% HSA Plus Embedded Gold <i>Modified from \$2500-100% HSA Plus Embedded Gold</i>	Deductible	Individual \$2,500 / Family \$5,000	Individual \$2,700 / Family \$5,400
	Out-of-Pocket	Individual \$2,500 / Family \$5,000	Individual \$2,700 / Family \$5,400

HSA PLUS EMBEDDED PLAN SPECIFIC CHANGES, IN-NETWORK

Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$3400-100% HSA Plus Embedded Gold <i>Modified from \$3300-100% HSA Plus Embedded Gold</i>	Deductible	Individual \$3,300 / Family \$6,600	Individual \$3,400 / Family \$6,800
	Out-of-Pocket	Individual \$3,300 / Family \$6,600	Individual \$3,400 / Family \$6,800
☒ \$4300-100% HSA Plus Embedded Gold <i>Modified from \$3900-100% HSA Plus Embedded Gold</i>	Deductible	Individual \$3,900 / Family \$7,800	Individual \$4,300 / Family \$8,600
	Out-of-Pocket	Individual \$3,900 / Family \$7,800	Individual \$4,300 / Family \$8,600
☒ \$5600-100% HSA Plus Embedded Silver <i>Modified from \$5500-100% HSA Plus Embedded Silver</i>	Deductible	Individual \$5,500 / Family \$11,000	Individual \$5,600 / Family \$11,200
	Out-of-Pocket	Individual \$5,500 / Family \$11,000	Individual \$5,600 / Family \$11,200
☒ \$7000-100% HSA Plus Embedded Silver <i>Modified from \$6500-100% HSA Plus Embedded Silver</i>	Deductible	Individual \$6,500 / Family \$13,000	Individual \$7,000 / Family \$14,000
	Out-of-Pocket	Individual \$6,500 / Family \$13,000	Individual \$7,000 / Family \$14,000
☒ \$3400-70% HSA Plus Embedded Silver <i>Modified from \$3300-70% HSA Plus Embedded Silver</i>	Deductible	Individual \$3,300 / Family \$6,600	Individual \$3,400 / Family \$6,800
	Out-of-Pocket	Individual \$6,800 / Family \$13,600	Individual \$6,900 / Family \$13,800
☒ \$5500-70% HSA Plus Embedded Silver <i>Modified from \$5000-70% HSA Plus Embedded Silver</i>	Deductible	Individual \$5,000 / Family \$10,000	Individual \$5,500 / Family \$11,000
	Out-of-Pocket	Individual \$7,000 / Family \$14,000	Individual \$7,500 / Family \$15,000

TIEREDCHOICE COPAY PLAN SPECIFIC CHANGES, IN-NETWORK			
Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$3000-\$60 Deductible-Copay TieredChoice Gold	Out-of-Pocket	Individual \$6,500 / Family \$13,000	Individual \$7,200 / Family \$14,400
☒ \$6600-\$100 Deductible-Copay TieredChoice Silver <i>Modified from \$6000-\$90 Deductible-Copay TieredChoice Silver</i>	Select Tier Office Visit	\$45 copay	\$10 copay
	Standard Tier Office Visit	\$90 copay	\$100 copay
	Select Tier Deductible	Individual \$5,000 / Family \$15,000	Individual \$4,000 / Family \$12,000
	Standard Tier Deductible	Individual \$6,000 / Family \$18,000	Individual \$6,600 / Family \$19,800
	Out-of-Pocket	Individual \$9,000 / Family \$18,000	Individual \$10,000 / Family \$20,000

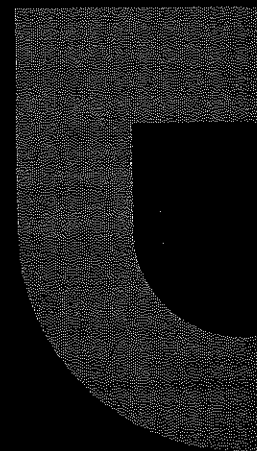
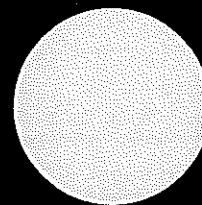
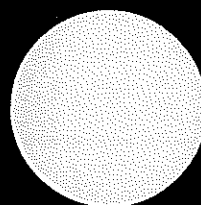
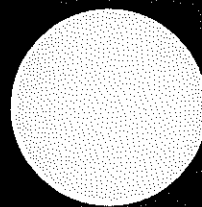
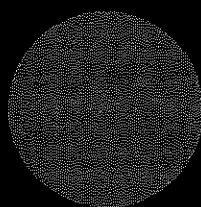
TIEREDCHOICE HSA PLUS NON-EMBEDDED PLAN SPECIFIC CHANGES, IN-NETWORK			
Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$3400-100% HSA Plus Non-Embedded TieredChoice Gold <i>Modified from \$3000-100% HSA Plus Non-Embedded TieredChoice Gold</i>	Standard Tier Deductible	Individual \$3,000 / Family \$6,000	Individual \$3,400 / Family \$6,800
	Standard Tier Out-of-Pocket	Individual \$3,000 / Family \$6,000	Individual \$3,400 / Family \$6,800
☒ \$4000-100% HSA Plus Non-Embedded TieredChoice Gold <i>Modified from \$3500-100% HSA Plus Non-Embedded TieredChoice Gold</i>	Select Tier Deductible	Individual \$2,500 / Family \$5,000	Individual \$2,200 / Family \$4,400
	Select Tier Out-of-Pocket	Individual \$2,500 / Family \$5,000	Individual \$2,200 / Family \$4,400
	Standard Tier Deductible	Individual \$3,500 / Family \$7,000	Individual \$4,000 / Family \$8,000
	Standard Tier Out-of-Pocket	Individual \$3,500 / Family \$7,000	Individual \$4,000 / Family \$8,000

TIEREDCHOICE HSA PLUS EMBEDDED PLAN SPECIFIC CHANGES, IN-NETWORK			
Scope	Benefit Category	Current Benefit	New Benefit Upon renewal in 2026
☒ \$4700-100% HSA Plus Embedded TieredChoice Gold <i>Modified from \$4200-100% HSA Plus Embedded TieredChoice Gold</i>	Select Tier Deductible	Individual \$3,300 / Family \$6,600	Individual \$3,400 / Family \$6,800
	Select Tier Out-of-Pocket	Individual \$3,300 / Family \$6,600	Individual \$3,400 / Family \$6,800
	Standard Tier Deductible	Individual \$4,200 / Family \$8,400	Individual \$4,700 / Family \$9,400
	Standard Tier Out-of-Pocket	Individual \$4,200 / Family \$8,400	Individual \$4,700 / Family \$9,400
☒ \$6500-100% HSA Plus Emb TieredChoice Gold	Select Tier Deductible	Individual \$3,500 / Family \$7,000	Individual \$3,700 / Family \$7,400
	Select Tier Out-of-Pocket	Individual \$3,500 / Family \$7,000	Individual \$3,700 / Family \$7,400

PLAN OFFERING CHANGES

Current plan maps to comparable plan for renewal. Employers may choose alternative options. Review the Summary of Benefits and Coverage for plan details.

MAPPED PLAN OPTION – UPON RENEWAL IN 2026	
Terming Plan	2026 Mapped Plan
☒ \$500-\$60 Deductible-Copay Gold TieredChoice	Employers will be offered the \$1,000-\$60 Deductible-Copay Gold TieredChoice



Renewal packet for small employers

2026





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Renewal guide

Here are steps to guide you through the renewal process.

1. Automatic enrollment:

- You will be automatically enrolled in the plan(s) included in this renewal proposal.
- For plans that are no longer offered, an alternative option has been selected for your review.
- If you are content with the plan(s) outlined in the proposal, no further action is needed.

2. Plan or network changes:

- If you intend to make changes to your plan or network, notify your broker or account manager.
- Utilize the Renewal Alternate Plan Options signature page in this proposal to request any changes.
- Ensure you send a signed copy to your broker or account manager by the first of the month before your renewal date.
- Remember that plan changes must adhere to the plan pairing guidelines.

3. Rate sheets:

- Keep the rate sheet(s) provided in this proposal handy.
- These sheets contain the premium information for the plan(s) you are offering.
- They will help you determine the cost when adding an employee or dependent.

4. Employee updates:

- Update information regarding who is covered and which plan your employees are on.
- You can make these updates using the Online Enrollment E-Tool on the secure employer portal.
- Ensure that you complete these updates after we have processed your renewal in the system.
- Additionally, you can send plan elections and new enrollments to your billing representative.
- Remember that updates should be submitted by the first of the month before your renewal date.
- This ensures member ID cards are received in advance of the plan's effective date.

5. Billing and enrollment adjustments:

- Your new bill will be based on the current enrollment using next year's rates and plan options.
- Please pay as billed, and any enrollment adjustments will be reflected in future invoices after the updates are processed.

Need to end your coverage?

Please email the completed **Cancellation form** to:
SalesClientService@HealthPartners.com and your sales account manager before the cancellation effective date. Requests received after this date will be processed for the next month.

12/2024 10/25/2024 10/25/2024 10/25/2024



Benefits and services that make a difference

Tools for healthy living, always included

HealthPartners provides best in class solutions designed to help employees achieve their health goals and receive quality care. Our standard services integrate seamlessly into your employee's health plan while saving both you and your employees money.

Value Added Benefits

Employee Assistance Program (EAP)

HealthPartners' Employee Assistance Program (EAP) is built in to your health plan. You and your employees can turn to the EAP to get personalized support and resources to manage stress, be more productive at work and live healthier every day. Our EAP offers a full-service experience, providing ongoing support for a wide variety of situations your employees face. Your employees can access EAP by logging on to hpeap.com and using password [hpeap](http://hpeap.com).

Embedded pediatric dental

Pediatric preventive dental care is covered 100% for children through age 18. Basic, minor and medically necessary orthodontic benefits are subject to the medical plan's deductible and coinsurance provisions, including out-of-pocket maximums.

No cost preventive drugs

All medical plans cover select preventive drugs at no cost. Visit healthpartners.com/formulary to view the Commercial ACA (Affordable Care Act) preventive drug list available to members.

Living Well

No matter where your employees are on their health journey, HealthPartners supports members in achieving their health goals. Employees have access to engaging tools, services and resources designed to maintain and improve their health. We make it simple to get started with solutions that are integrated, personalized and evidence-based.

Health assessment and digital activities

Support your employees on their journey to better health with Living Well. Members start with a health assessment that identifies areas of their health to focus on. Then they can complete digital health activities that promote healthy behavior change. With the HealthPartners mobile app, members can access their activities right from their smartphones.

Resiliency and mental health

myStrength is a digital program that uses evidence-based cognitive behavioral therapy to bring a full spectrum of mental health support to all members. Through self-paced, engaging programs, members can select from a range of topics including, stress anxiety, depression, sleep and much more.

Diabetes and hypertension management with Omada

Omada offers digital health coaching support and smart connected devices to prevent and manage diabetes, hypertension and healthy weight.



AchieveSM SE network

Save money with high-quality care in your community

Save more and help your employees achieve better health by giving them easy access to best-in-class care close to home.

Choose the Achieve SE network

Save 9% when you switch to the Achieve network from the Open Access network.

Everyone benefits from:

- **Access to the best care possible.** The network includes the highest-quality, lowest-cost providers in the Twin Cities and surrounding areas – no referral needed.
- **National coverage.** Travelers and dependents living outside of Minnesota and western and central Wisconsin have in-network access to a value-based network of providers – no referral needed.
- **The plan that fits them.** Employers with 6 or more enrolled employees can offer flexible, mix and match plan options. Your employees can choose the plan that works best for their lifestyle and budget.
- **Convenient and affordable online care.** Members get in-network coverage for telehealth providers, like Virtuwell®, Doctor On Demand and Teladoc.

Achieve SE is a good fit for companies that:

- Are headquartered in the greater Twin Cities metro area
- Have the majority of their employees living in the greater Twin Cities metro area
- Want to save money without sacrificing the quality of care their employees receive

Find Achieve SE care providers near you

The Achieve SE network includes the best doctors and hospitals in the Twin Cities metro and surrounding areas based on patient surveys, claims information and health care data. These providers have a strong record of happier, healthier patients with lower overall health care costs.

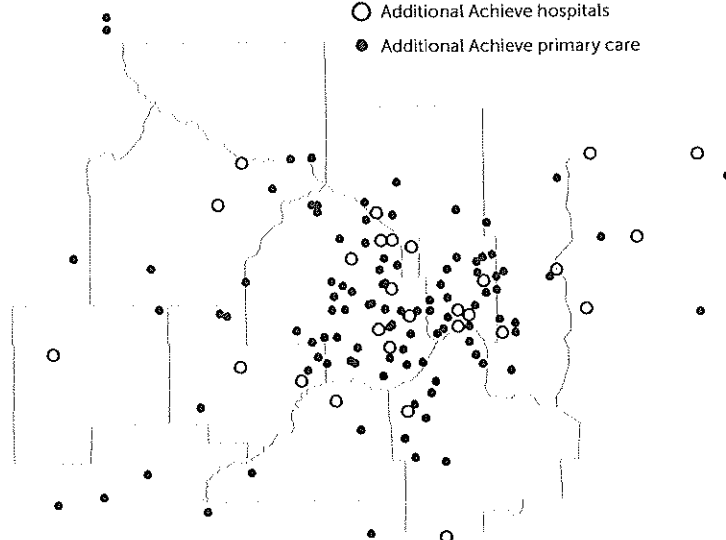
Try a defined contribution strategy with Achieve SE.

Employees appreciate the opportunity to choose the right plan options for them based on their needs and budget, without compromising the quality of care they receive.

Clinics and hospitals include:

- Amery Hospital & Clinic
- Burnsville Family Physicians
- Children's Hospitals and Clinics
- Entira Family Health Clinics
- Gillette Children's Specialty Healthcare
- HealthPartners Clinics
- Hennepin Health & Hennepin County Medical Center
- Hudson Hospital & Clinic
- Hutchinson Health
- Lakeview Clinic
- Lakeview Hospital
- Methodist Hospital
- North Memorial Hospital
- North Suburban Family Physicians
- Northwest Family Physicians
- Park Nicollet Clinics
- Regions Hospital
- Ridgeview Medical Center
- Riverway Clinic
- Stillwater Medical Group
- St. Francis Regional Medical Center
- TRIA Orthopedic Center
- Voyage Healthcare
- Westfields Hospital & Clinic
- And more!

- HealthPartners & Park Nicollet hospitals
- HealthPartners & Park Nicollet primary care
- Additional Achieve hospitals
- Additional Achieve primary care



Search the Achieve SE network at
healthpartners.com/achievese

Enrollees must live in the network service area if enrolling.

More information

Call your broker, consultant or HealthPartners account manager at **952-883-5200** or **800-298-4235**.





CentraChoice SE network

Save money with high-quality care in your community

Give your employees what they want: access to the best, most affordable care, right in your community.

A collaborative CentraCare Health partnership

The CentraChoice SE network delivers the highest quality, affordable, local care possible. Our close collaboration with providers to improve service quality and offer exclusive support options helps your employees be healthier and more productive. This unique partnership lowers your total cost of care and helps your employees better manage their health conditions and get the preventive care they need.

Choose the CentraChoice SE network

Save 6.9% when you switch to the CentraChoice SE network from the Open Access network.

Everyone benefits from:

- **High-performing network.** Access to high-quality, low cost providers in Central Minnesota and the Twin Cities Metro area – no referral needed.
- **National in-network coverage.** Travelers and dependents living outside of Minnesota and Western and Central Wisconsin can get the care they need, when they need it – no referral needed.
- **Quality plan options.** Your employees can choose the plan that works best for their lifestyle and budget.
- **Convenient and affordable online care.** Get unlimited free visits to Virtuwell® – an online clinic offering customized treatment plans for a variety of common conditions. Plus, get in-network coverage for other telehealth providers, like Doctor On Demand and Teladoc.

CentraChoice SE is a good fit for companies that:

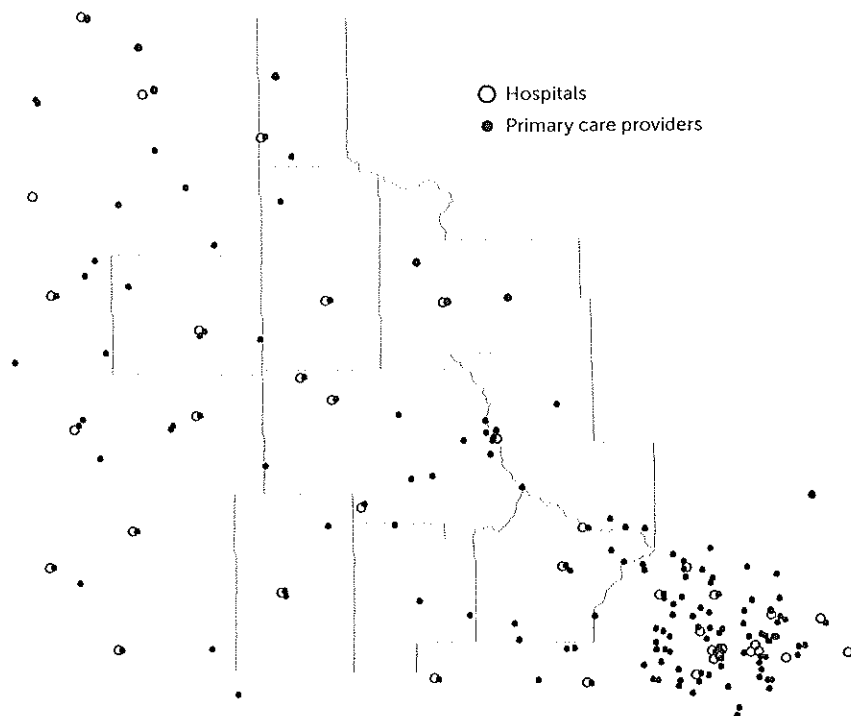
- Are headquartered in the St. Cloud area or nearby central Minnesota counties
- Have the majority of their employees living in the St. Cloud, central Minnesota or Twin Cities area
- Want to save money without sacrificing quality care

Find CentraChoice SE care providers near you

The CentraChoice SE network is a collaboration between HealthPartners, CentraCare Health and their local care partners. Coordinated care delivers better health outcomes, a seamless experience and lower overall costs for members.

Clinics and hospitals:

- Allina Health
- Alomere Health
- Astera Health
- Brooten Medical Center
- CentraCare Health, including St. Cloud Medical Group
- Family Medical Center
- Foley Medical Center
- HealthPartners and Park Nicollet clinics and hospitals
- Hutchinson Health
- Integrity Health Network
- Meeker Memorial Hospital & Clinics
- Minnesota Rural Health Cooperative
- Prairie Ridge Hospital and Health
- Ridgeview Clinics
- Sanford Clinics
- CHI St. Gabriel's Health
- Stellis Health
- And more!



Search the CentraChoice SE network at
healthpartners.com/centrachoicese

Enrollees must live in the network service area if enrolling.

© 2025 HealthPartners

Learn more

Call your broker, consultant or HealthPartners account manager at 952-883-5200 or 800-298-4235.



Group name: City of Baldwin

Group number: 38951

Renewal alternate plan options

The estimated annual premium for each network is based on the medical census in this renewal.					
Plan type	Plan name	Open Access	Perform SE	Achieve SE	CentraChoice SE
MN Copay & Copay/Deductible	\$25-90% Platinum SE	\$66,231.48	\$64,307.16	\$60,124.68	\$61,689.00
MN Copay & Copay/Deductible	\$500-\$25 Platinum SE	\$61,901.76	\$60,103.20	\$56,194.20	\$57,656.28
MN Copay & Copay/Deductible	\$600-\$50 Gold SE	\$55,509.12	\$53,896.32	\$50,391.00	\$51,702.12
MN Copay & Copay/Deductible	\$1000-\$50 Gold SE	\$54,668.64	\$53,080.32	\$49,628.04	\$50,919.24
MN Copay & Copay/Deductible	\$2000-\$30 with Rx Copays Gold SE	\$52,790.28			
MN Copay & Copay/Deductible	\$2000-\$50 Gold SE	\$53,108.64	\$51,565.68	\$48,211.92	\$49,466.28
MN Copay & Copay/Deductible	\$3000-\$50 Gold SE	\$52,070.88	\$50,557.92	\$47,269.80	\$48,499.56
MN Copay & Copay/Deductible	\$4000-\$50 Gold SE		\$49,779.00	\$46,541.40	\$47,752.32
MN Copay & Copay/Deductible	\$5000-\$80 with Rx Copays Silver SE	\$47,976.72			
MN Copay & Copay/Deductible	\$6000-\$70 Silver SE	\$47,702.88	\$46,317.00	\$43,304.64	\$44,431.32
MN Three for Free	\$1000-70% Three for Free Gold SE	\$54,592.20	\$53,006.04	\$49,558.68	\$50,848.08
MN Three for Free	\$2000-70% Three for Free Gold SE	\$51,606.00	\$50,106.60	\$46,847.76	\$48,066.72
MN Three for Free	\$4300-70% Three for Free Silver SE	\$47,231.76	\$45,859.44	\$42,876.84	\$43,992.48
MN Three for Free	\$5400-70% Three for Free Silver SE	\$45,219.72	\$43,905.96	\$41,050.32	\$42,118.44
MN Three for Free	\$3000-60% Three for Free Silver SE	\$47,702.88	\$46,317.00	\$43,304.64	\$44,431.32
MN HSA	\$2600-100% HSA Non-Embedded Gold SE	\$56,496.00	\$54,854.52	\$51,286.92	\$52,621.32
MN HSA	\$4600-100% HSA Non-Embedded Silver SE	\$49,785.00	\$48,338.52	\$45,194.64	\$46,370.52
MN HSA Embedded	\$3400-100% HSA Embedded Gold SE	\$55,222.56	\$53,618.16	\$50,130.96	\$51,435.24
MN HSA Embedded	\$4000-100% HSA Embedded Gold SE	\$53,229.60	\$51,683.16	\$48,321.72	\$49,578.96
MN HSA Embedded	\$5300-100% HSA Embedded Silver SE	\$50,173.44	\$48,715.68	\$45,547.32	\$46,732.32
MN HSA Embedded	\$6200-100% HSA Embedded Silver SE	\$47,741.16	\$46,354.08	\$43,339.32	\$44,466.84
MN HSA Embedded	\$7400-100% HSA Embedded Bronze SE	\$45,251.52	\$43,936.80	\$41,079.24	\$42,148.08
MN HSA Plus	\$2700-100% HSA Plus Non-Embedded Gold SE	\$57,030.84	\$55,373.88	\$51,772.44	\$53,119.44
MN HSA Plus	\$3400-100% HSA Plus	\$56,355.96	\$54,718.56	\$51,159.72	\$52,490.88

The estimated annual premium for each network is based on the medical census in this renewal.					
Plan type	Plan name	Open Access	Perform SE	Achieve SE	CentraChoice SE
Embedded	Embedded Gold SE				
MN HSA Plus Embedded	\$4300-100% HSA Plus Embedded Gold SE	\$53,732.64	\$52,171.44	\$48,778.32	\$50,047.44
MN HSA Plus Embedded	\$5600-100% HSA Plus Embedded Silver SE	\$50,479.08	\$49,012.44	\$45,824.76	\$47,016.96
MN HSA Plus Embedded	\$7000-100% HSA Plus Embedded Silver SE	\$47,658.36	\$46,273.68	\$43,264.08	\$44,389.80
MN HSA Plus Embedded	\$3400-70% HSA Plus Embedded Silver SE	\$50,300.76	\$48,839.28	\$45,662.88	\$46,850.88
MN HSA Plus Embedded	\$5500-70% HSA Plus Embedded Silver SE	\$47,441.88	\$46,063.44	\$43,067.64	\$44,188.08
MN Deductible/Coinsurance	\$8700-100% Bronze SE	\$42,774.72	\$41,532.00	\$38,830.80	\$39,841.08

The following plan pairing rules apply:

- Employers with 1-5 enrolled employees may offer one plan.
- Employers with 6-9 enrolled employees may offer up to two plans with one network or one plan with two networks. One of those networks must be the Select network or Cornerstone network.
- Employers with 10-50 enrolled employees may offer up to three plans. All three plans may be offered on two networks.
- Platinum plans cannot be paired with Bronze plans. Any other metal level combinations are allowed.
- Embedded and non-embedded HSA plans may be paired. This includes HSA Plus plans.
- The Achieve, Select, and TieredChoice networks can be offered alongside a broad network, such as Open Access or Perform.
- The Cornerstone network can be offered with the Open Access network.
- The Achieve, Cornerstone, Select, and TieredChoice networks cannot be offered together.
- Open Access and Perform networks cannot be offered together.
- CentraChoice cannot be offered with another network.
- Enrollees must live in the network service area if choosing Achieve, CentraChoice, Cornerstone, Select or TieredChoice.

Small employer medical plan guide – Minnesota

Information reflects what members pay

Plan	Metal level	SE factors	In-network													
			Deductible	Out-of-pocket	Medical						Prescription drugs					
			Individual/Family	Individual/Family	Office visits	Inpatient/ outpatient hospital	Lab	MRI/ CT/ X-ray	ER	Preferred		Non-Preferred	Specialty		Oral chemo	
										Generic	Brand		Generic	Brand		
Copay-Coinsurance																
\$25-90%	Platinum	1.000	None	\$3,000/\$6000	\$25	10%	10%	10%	\$200	\$20	\$75	\$150	20%	30%	10%	
Deductible-Copay																
\$500-\$25	Platinum	0.932	\$500/\$1,500	\$2,500/\$5,000	\$25	20%	20%	20%	20%	\$20	\$75	\$150	20%	30%	20%	
\$600-\$50	Gold	0.833	\$600/\$1,800	\$6,250/\$12,500	\$50	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$1,000-\$50	Gold	0.820	\$1,000/\$3,000	\$6,400/\$12,800	\$50	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$2,000-\$30 Rx Copay*	Gold	0.799	\$2,000/\$6,000	\$10,150/\$20,300	\$30	30%	30%	30%	30%	\$20	\$75	\$150	\$800	\$845	\$845	
\$2,000-\$50	Gold	0.794	\$2,000/\$6,000	\$6,500/\$13,000	\$50	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$3,000-\$50	Gold	0.777	\$3,000/\$9,000	\$6,500/\$13,000	\$50	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$4,000-\$50	Gold	0.764	\$4,000/\$12,000	\$6,600/\$13,200	\$50	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$5,000-\$80 Rx Copay*	Silver	0.726	\$5,000/\$15,000	\$10,150/\$20,300	\$80	30%	30%	30%	30%	\$20	\$75	\$150	\$800	\$845	\$845	
\$6,000-\$70	Silver	0.708	\$6,000/\$18,000	\$9,000/\$18,000	\$70	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
Three for Free**																
\$1,000-70%	Gold	0.826	\$1,000/\$3000	\$6,500/\$13,000	30%	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$2,000-70%	Gold	0.722	\$2,000/\$6,000	\$7,500/\$15,000	30%	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$3,000-60%	Silver	0.781	\$3,000/\$9,000	\$9,200/\$18,400	40%	40%	40%	40%	40%	\$20	\$75	\$150	20%	30%	30%	
\$4,300-70%	Silver	0.715	\$4,300/\$12,900	\$9,100/\$18,200	30%	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	
\$5,400-70%	Silver	0.684	\$5,400/\$16,200	\$10,150/\$20,300	30%	30%	30%	30%	30%	\$20	\$75	\$150	20%	30%	30%	

Virtual visits are covered at no cost. • Office visit copays and prescriptions are not subject to the deductible.

* Rx Copay plans must be paired with the Open Access network.

**For In-network services, each family member may receive up to a combined total of three office visits, convenience care and urgent care visits each year, where the physician's services are covered at 100%. All charges for office procedures, laboratory, radiology, day treatment services, group visits, chiropractic care, physical, occupational, and speech therapy services are subject to the deductible and coinsurance.



Small employer medical plan guide – Minnesota

Information reflects what members pay

Plan	Metal level	SE factors	In-network						
			Deductible	Out-of-pocket	Medical	Prescription drugs			
			Individual/Family	Individual/Family	Coinsurance	HSA preventive list Generic	Brand	Preferred/ Non-preferred	Specialty/ Oral chemo
HSA Non-Embedded Deductible									
\$2,600-100%	Gold	0.855	\$2,600/\$5,200	\$2,600/\$5,200	0%	NA	NA	0%	0%
\$4,600-100%	Silver	0.753	\$4,600/\$9,200	\$4,600/\$9,200	0%	NA	NA	0%	0%
HSA Embedded Deductible									
\$3,400-100%	Gold	0.835	\$3,400/\$6,800	\$3,400/\$6,800	0%	NA	NA	0%	0%
\$4,000-100%	Gold	0.805	\$4,000/\$8,000	\$4,000/\$8,000	0%	NA	NA	0%	0%
\$5,300-100%	Silver	0.759	\$5,300/\$10,600	\$5,300/\$10,600	0%	NA	NA	0%	0%
\$6,200-100%	Silver	0.722	\$6,200/\$12,400	\$6,200/\$12,400	0%	NA	NA	0%	0%
\$7,400-100%	Bronze	0.685	\$7,400/\$14,800	\$7,400/\$14,800	0%	NA	NA	0%	0%
HSA Plus Non-Embedded Deductible*									
\$2,700-100%	Gold	0.863	\$2,700/\$5,400	\$2,700/\$5,400	0%	\$0	\$60	0%	0%
HSA Plus Embedded Deductible*									
\$3,400-100%	Gold	0.853	\$3,400/\$6,800	\$3,400/\$6,800	0%	\$0	\$60	0%	0%
\$4,300-100%	Gold	0.813	\$4,300/\$8,600	\$4,300/\$8,600	0%	\$0	\$60	0%	0%
\$5,600-100%	Silver	0.764	\$5,600/\$11,200	\$5,600/\$11,200	0%	\$0	\$60	0%	0%
\$7,000-100%	Silver	0.721	\$7,000/\$14,000	\$7,000/\$14,000	0%	\$0	\$60	0%	0%
\$3,400-70%	Silver	0.761	\$3,400/\$6,800	\$6,900/\$13,800	30%	\$0	\$60	30%	30%
\$5,500-70%	Silver	0.718	\$5,500/\$11,000	\$7,500/\$15,000	30%	\$0	\$60	30%	30%
Deductible-Coinsurance									
\$8,700-100%	Bronze	0.647	\$8,700/\$17,400	\$8,700/\$17,400	0%	0%	0%	0%	0%

Virtuwell visits are covered at no cost. All non-preventive services are subject to deductible.

*In addition to covering ACA preventive drugs at no cost, HSA Plus plans cover drugs on the Basic HSA Preventive Drug List prior to the deductible; visit healthpartners.com/formulary to see the full list of drugs.

Basic HSA Preventive Drug List + IRS HSA preventive services = HSA Plus plans

HealthPartners offers HSA Plus members a robust list of medications covered pre-deductible. Coverage includes nearly 150 drugs in more than 35 drug classes that cover eight therapeutic conditions. These medications prevent disease progression and help members manage cardiovascular conditions, depression, breast cancer, diabetes and osteoporosis.

HSA Plus members with certain chronic health conditions may also be eligible for preventive care pre-deductible as determined by the IRS guidelines. Eligible care includes retinopathy screenings if diagnosed for diabetes, glucometers, hemoglobin A1c lab testing, international normalized ration (INR) lab testing and low-density lipoprotein (LDL) lab testing.



TieredChoice

Small employer medical plan guide – Minnesota metro only

Information reflects what members pay

Plan	Metal level	SE factors	In-network																
			Select tier				Standard tier				Deductible	Out-of-pocket	Prescription drugs						
			Office visit	Outpatient hospital	Inpatient hospital	X-ray	Office visit	Outpatient hospital	Inpatient hospital	X-ray			ER	Preferred		Non-Preferred	Specialty		Oral chemo
														Generic	Brand		Generic	Brand	
NEW TieredChoice All-Copay																			
\$150	Silver	0.762	\$100	\$2,500	\$4,500	\$120	\$150	\$5,000	\$6,000	\$200	\$1,000	None	\$10,150/\$20,300	\$20	\$75	\$150	20%	30%	30%
Virtual/telehealth visits are covered at no cost. • Inpatient copay is per admittance. • Lab, X-ray, MRI, and CT scan cost may vary based on location of service. • DME, hospice, and injections are 30% coinsurance. • Non-formulary drugs are not covered. • Select Tier benefits do not apply to emergency care services. • Select Tier benefits apply to all covered in-network outpatient services for mental health and substance use disorder. • The out-of-pocket maximum for the Select Tier and Standard Tier are combined for covered services.																			

Plan	Metal level	SE factors	In-network											
			Select tier		Standard tier		Out-of-pocket	Medical	Prescription drugs					
			Deductible	Office	Deductible	Office	Individual/Family	Coinsurance	Preferred		Non-Preferred	Specialty		Oral chemo
			Individual/Family	visit	Individual/Family	visit			Generic	Brand		Generic	Brand	
TieredChoice Deductible-Copay														
\$1,000-\$60	Gold	0.776	\$100/\$300	\$10	\$1,000/\$3,000	\$60	\$6,700/\$13,400	30%	\$20	\$75	\$150	20%	30%	30%
\$1,500-\$60	Gold	0.767	\$250/\$750	\$10	\$1,500/\$4,500	\$60	\$6,500/\$13,000	30%	\$20	\$75	\$150	20%	30%	30%
\$3,000-\$60	Gold	0.734	\$1,000/\$3,000	\$10	\$3,000/\$9,000	\$60	\$7,200/\$14,400	30%	\$20	\$75	\$150	20%	30%	30%
\$6,600-\$100	Silver	0.656	\$4,000/\$12,000	\$10	\$6,600/\$19,800	\$100	\$10,000/\$20,000	30%	\$20	\$75	\$150	20%	30%	30%
TieredChoice Three for Free*														
\$6,000-80%	Silver	0.677	\$3,000/\$6,000	20%	\$6,000/\$12,000	20%	\$8,000/\$16,000	20%	\$20	\$75	\$150	20%	30%	20%

Virtual/tele visits are covered at no cost. • Office visit copays and prescriptions are not subject to the deductible.

Select Tier benefits do not apply to emergency care services. Select Tier benefits apply to all covered in-network outpatient services for mental health and substance use disorder. The combined deductibles and out-of-pocket maximum for the Select Tier and Standard Tier will not exceed the Standard Tier amounts for covered services.

*The Select Tier includes a combined total of three office visits, convenience care and urgent care visits each year for each family member, where the physician's services are covered at 100 percent. All charges for office procedures, laboratory, radiology, day treatment services, group visits, chiropractic care, physical, occupational, and speech therapy services are subject to the deductible and coinsurance.



TieredChoice

Small employer medical plan guide – Minnesota metro only

Information reflects what members pay

Plan	Metal level	SE factors	In-network								
			Select tier		Standard tier		Medical	Prescription drugs			
			Deductible Individual/Family	Out-of-pocket Individual/Family	Deductible Individual/Family	Out-of-pocket Individual/Family	Coinurance	HSA preventive list Generics	Brand	Preferred/ Non-preferred	Specialty/ oral chemo
TieredChoice HSA Plus Non-Embedded Deductible											
\$3,400-100%	Gold	0.816	\$1,750/\$3,500	\$1,750/\$3,500	\$3,400/\$6,800	\$3,400/\$6,800	0%	\$0	\$60	0%	0%
\$4,000-100%	Gold	0.766	\$2,200/\$4,400	\$2,200/\$4,400	\$4,000/\$8,000	\$4,000/\$8,000	0%	\$0	\$60	0%	0%
TieredChoice HSA Plus Embedded Deductible											
\$4,700-100%	Gold	0.763	\$3,400/\$6,800	\$3,400/\$6,800	\$4,700/\$9,400	\$4,700/\$9,400	0%	\$0	\$60	0%	0%
\$6,500-100%	Silver	0.718	\$3,700/\$7,400	\$3,700/\$7,400	\$6,500/\$13,000	\$6,500/\$13,000	0%	\$0	\$60	0%	0%
\$7,000-100%	Silver	0.694	\$4,500/\$9,000	\$4,500/\$9,000	\$7,000/\$14,000	\$7,000/\$14,000	0%	\$0	\$60	0%	0%

Virtual visits are covered at no cost. All non-preventive services are subject to deductible. In addition to covering ACA preventive drugs at no cost, HSA Plus plans cover drugs on the Basic HSA Preventive Drug List prior to the deductible; visit healthpartners.com/formulary to see the full list of drugs.

Select Tier benefits do not apply to emergency care services and prescription drugs. Select Tier benefits apply to all covered in-network outpatient services for mental health and substance use disorder. All non-preventive services are subject to the deductible. The combined deductibles and out-of-pocket maximum for the Select Tier and Standard Tier will not exceed the Standard Tier amounts for covered services.





Get convenient, affordable dental care

Improve overall health with the right dental plan

Consider a dental plan that links oral health to overall health. Help improve your employees' care outcomes, lower costs and enhance employee productivity.

Start with a healthy dental approach

Create more than great smiles with the right dental plan. We go beyond the basics to bring you and your employees more value and more ways to stay healthy with benefits tied to overall health.

Maximize employee satisfaction

- **Network access** – With more than 130,000 PPO providers nationwide, employees can choose among quality, low-cost providers with no referral needed.
- **Little PartnersSM dental benefit** – Kids 12 and younger get 100% in-network coverage with no coinsurance, no deductible and no annual maximum. Orthodontia is excluded.
- **HealthPartners MouthWise Matters** – An enhanced benefit that pays 100% at in-network providers for extra exams, cleanings and gum care for those who are pregnant or living with diabetes.

Save when you bundle dental with a fully insured, ACA-qualified medical plan

- Save up to 25%, where available, on the dental family rate.*
- Get a 2-year dental rate guarantee.
- Reduce administration time with one member services number, one website, enrollment process and account management.

Enjoy added benefits

Our dental plans cover sealants for all age groups to help prevent cavities. Plus, for those needing dental implants, our plans provide coverage for both the surgical placement and cost of prosthetics.

Contact us

Call your account manager to learn more about our dental plans or visit healthpartners.com.

* If a small medical group is reclassified as large under the ACA, moves to level funded or switches medical carriers, the dental savings is no longer valid.

Minnesota plans are underwritten and/or administered by HealthPartners family of health plans which includes, HealthPartners, Inc., HealthPartners Insurance Company and HealthPartners Administrators, Inc. Fully insured Iowa, North Dakota, South Dakota and Wisconsin plans are underwritten by HealthPartners Insurance Company.

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Bundle your medical and dental insurance

Dental quotes to consider

We've put together three options that may be a great fit.
Contact your account manager to learn more.

Greater MN, small group employer sponsored

Open Access – employer-sponsored plans

	Open Access Advantage 1000/750		Open Access 1000		Open Access 1500	
	OA network	Any dentist*	OA network	Any dentist*	OA network	Any dentist*
Annual max.	\$1,000	\$750	\$1,000	\$1,000	\$1,500	\$1,500
Deductible	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
Preventive	100%	80%	100%	100%	100%	100%
Sealants, space maintainers	100%	80%	100%	100%	100%	100%
Amalgam fillings	80%	50%	80%	80%	80%	80%
Posterior composite fillings	50%	50%	80%	80%	80%	80%
Simple extractions	80%	50%	80%	80%	80%	80%
Non-surgical periodontics	50%	50%	80%	80%	80%	80%
Endodontics	50%	50%	80%	80%	80%	80%
Surgical periodontics	50%	50%	50%	50%	50%	50%
Other oral surgery	50%	50%	50%	50%	50%	50%
Crowns, onlays	50%	50%	50%	50%	50%	50%
Bridges, dentures	50%	50%	50%	50%	50%	50%
Dental implants	50%	50%	50%	50%	50%	50%

*If the out-of-network dentist charges more than the maximum allowable charge, the member may be responsible for the difference.

Search the Open Access network at
healthpartners.com/dentalopenaccess

(Effective 4/1/2026 – 9/30/2026)

Rates		Open Access Advantage 1000/750	Open Access 1000	Open Access 1500
2-4 enrolled employees	Single	\$46.56	\$52.57	\$56.98
	Single + 1	\$93.11	\$105.16	\$113.99
	Family	\$139.65	\$157.72	\$171.00
5-9 enrolled employees	Single	\$44.40	\$50.15	\$54.35
	Single + 1	\$88.83	\$100.31	\$108.73
	Family	\$133.22	\$150.46	\$163.07
10-24 enrolled employees	Single	\$37.96	\$42.87	\$46.48
	Single + 1	\$75.93	\$85.72	\$92.95
	Family	\$113.87	\$128.61	\$139.43
25+ enrolled employees	Single	\$35.82	\$40.44	\$43.84
	Single + 1	\$71.61	\$80.88	\$87.70
	Family	\$107.46	\$121.33	\$131.54

- ✓ Contribution requirement: a minimum of 50% of the single premium contributed by the employer.
- ✓ Participation requirement: 75% of employees not enrolled in a group plan elsewhere and 50% of all employees.
- ✓ Orthodontics for dependent children under age 19 is an optional add-on.
- ✓ Voluntary (employee-paid) plan options are available.
- ✓ Little PartnersSM dental benefit – Kids 12 and younger get 100% in-network coverage with no coinsurance, no deductible and no annual maximum. Excludes orthodontics.
- ✓ HealthPartners MouthWise Matters – An enhanced benefit that pays 100% in-network for extra services and gum care for those who are pregnant or living with diabetes.





Pediatric Dental benefit

Get dental benefits included with your medical plan

Your medical plan includes pediatric dental coverage to help your employees and their dependents achieve total health. Plus, you're meeting the requirements of the Affordable Care Act (ACA). These benefits are included within the ACA-compliant small employer medical plans issued by HealthPartners. Please note this is not a separate dental plan.

Seek care from a national dental network

For the pediatric dental benefit, it's easy for your employees to access dental care with more than 85,000 PPO (Preferred Provider Organization) dentists nationwide. To view providers, visit healthpartners.com/personaldental-openaccess.

Simplify your medical and dental benefits

If you're interested in adding a separate comprehensive dental plan, you'll save time and simplify your plan administration.

- Easy, seamless enrollment for medical and dental
- Convenient access to member services, materials and website
- 24/7 access to personal support for members
- Choice of plans and access to our larger national network of 130,000 providers

Enjoy retail savings

Get discounts at local and national healthy retailers. Visit healthpartners.com/healthydiscounts.

- Eyewear and hearing aids
- Fitness and wellness classes
- Healthy eating programs and delivery services
- Healthy mom and baby products
- And much more!

Learn more

Learn more

Contact your broker today to learn more about HealthPartners dental and medical plans.

Essential Health Benefit (EHB) summary¹

Services for children up to age 19	HealthPartners Open Access dental in-network coverage	Out-of-network coverage
Deductible	Applies to medical deductible	Applies to medical out-of-network deductible
Out-of-pocket maximum	Applies to medical out-of-pocket maximum	Applies to medical out-of-network out-of-pocket maximum

Preventive/Diagnostic care

Exams (2 per year)

Bitewing X-rays (1 per year)

Cleanings (2 per year)

Full mouth X-rays (1 every 3 years)

Fluoride treatments (1 per year)

Sealants (1 every 3 years)

100%
(deductible does not apply)

Consult your plan documents for exact coverage terms²

Basic I services

Fillings (amalgam, anterior composite)

Posterior composite fillings

Simple extractions

Non-surgical periodontics

Endodontics

Follow outpatient benefit in your Summary of Benefits and Coverage (SBC)

Follow out-of-network outpatient benefit in your Summary of Benefits and Coverage (SBC)

Basic II services

Oral surgery

Surgical periodontics

Follow outpatient benefit in your Summary of Benefits and Coverage (SBC)

Follow out-of-network outpatient benefit in your Summary of Benefits and Coverage (SBC)

Major services

Crowns

Bridges, dentures

Dental implants

Follow outpatient benefit in your Summary of Benefits and Coverage (SBC)

Follow out-of-network outpatient benefit in your Summary of Benefits and Coverage (SBC)

Orthodontics

Medically necessary orthodontics

Follow outpatient benefit in your Summary of Benefits and Coverage (SBC)

Not covered

¹ For copay medical plans, in-network preventive dental care is 100%, non-preventive is 80% and all out-of-network care is 50%.

² Preventive care is covered at 100% of the maximum allowable charge for non-network care in South Dakota.



Summary of Benefits and Coverage: What this Plan Covers & What You Pay for Covered Services
HealthPartners:\$4000-\$50 Gold SE Open Access

Coverage Period: 8/1/2026-7/31/2027
Coverage for: Single/Family | Plan Type: PPO

 The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, call 800-883-2177 or visit us at www.healthpartners.com. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at www.healthcare.gov/sbc-glossary or call 800-883-2177 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall <u>deductible</u> ?	In-network: \$4,000 Individual/ \$12,000 Family Out-of-network: \$10,000 Individual/ \$20,000 Family	Generally, you must pay all of the costs from <u>providers</u> up to the <u>deductible</u> amount before this <u>plan</u> begins to pay. If you have other family members on the <u>plan</u> , each family member must meet their own individual <u>deductible</u> until the total amount of <u>deductible</u> expenses paid by all family members meets the overall family <u>deductible</u> .
Are there services covered before you meet your <u>deductible</u> ?	Yes, some preventive care services are covered before you meet your deductible.	This <u>plan</u> covers some items and services even if you haven't yet met the <u>deductible</u> amount. But a <u>copayment</u> or <u>coinsurance</u> may apply. For example, this <u>plan</u> covers certain preventive services without <u>cost-sharing</u> and before you meet your <u>deductible</u> . See a list of covered <u>preventive services</u> at https://www.healthcare.gov/coverage/preventive-care-benefits/ .
Are there other <u>deductibles</u> for specific services?	No	You don't have to meet <u>deductibles</u> for specific services.
What is the <u>out-of-pocket limit</u> for this <u>plan</u> ?	In-network medical/pharmacy: \$6,600 Individual/\$13,200 Family Out-of-network medical/pharmacy: \$30,000 Individual/\$60,000 Family	The <u>out-of-pocket limit</u> is the most you could pay in a year for covered services. If you have other family members in this <u>plan</u> , they have to meet their own <u>out-of-pocket limits</u> until the overall family <u>out-of-pocket limit</u> has been met.

Important Questions	Answers	Why This Matters:
What is not included in the <u>out-of-pocket limit</u> ?	Premium, balance-billed charges (unless <u>balance-billing</u> is prohibited), and health care this <u>plan</u> doesn't cover.	Even though you pay these expenses, they don't count toward the <u>out-of-pocket limit</u> .
Will you pay less if you use a <u>network provider</u> ?	Yes. See www.healthpartners.com/openaccess or call 1-800-883-2177 for a list of <u>in-network providers</u> .	This <u>plan</u> uses a <u>provider network</u> . You will pay less if you use a <u>provider</u> in the <u>plan's network</u> . You will pay the most if you use an <u>out-of-network provider</u> , and you might receive a bill from a <u>provider</u> for the difference between the <u>provider's</u> charge and what your <u>plan</u> pays (<u>balance-billing</u>). Be aware, your <u>network provider</u> might use an <u>out-of-network provider</u> for some services (such as lab work). Check with your <u>provider</u> before you get services.
Do you need a <u>referral</u> to see a <u>specialist</u> ?	No	You can see the in-network <u>specialist</u> you choose without a <u>referral</u> .



All copayment and coinsurance costs shown in this chart are after your deductible has been met, if a deductible applies.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, and Other Important Information
		<u>Network Provider</u> (You will pay the least)	<u>Out-of-Network Provider</u> (You will pay the most)	
If you visit a health care <u>provider's</u> office or clinic	Primary care visit to treat an injury or illness	Primary Office Visit: \$50 <u>copay</u> /per visit, <u>Deductible</u> does not apply Convenience Care: \$25 <u>copay</u> /per visit, <u>Deductible</u> does not apply Virtuwell: No charge	Primary Office Visit: 50% <u>coinsurance</u> Convenience Care: 50% <u>coinsurance</u>	None
	<u>Specialist</u> visit	\$50 <u>copay</u> /per visit, <u>Deductible</u> does not apply	50% <u>coinsurance</u>	None
	<u>Preventive care/screening/immunization</u>	No charge	50% <u>coinsurance</u>	You may have to pay for services that aren't <u>preventive</u> . Ask your <u>provider</u> if the services needed are <u>preventive</u> . Then check what your <u>plan</u> will pay for.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, and Other Important Information
		Network Provider (You will pay the least)	Out-of-Network Provider (You will pay the most)	
If you have a test	Diagnostic test (x-ray, blood work)	30% <u>coinsurance</u>	50% <u>coinsurance</u>	None
	Imaging (CT/PET scans, MRIs)	30% <u>coinsurance</u>	50% <u>coinsurance</u>	None
If you need drugs to treat your illness or condition More information about <u>prescription drug coverage</u> is available at healthpartners.com/preferredrx	Generic drugs	\$20 <u>copay</u> , <u>Deductible</u> does not apply at retail, \$60 <u>copay</u> , <u>Deductible</u> does not apply for mail order.	50% <u>coinsurance</u> at retail, mail order not covered	31 day supply retail / 93 day supply mail order. Formulary insulin covered with no member cost-sharing after a \$25 benefit cap per prescription per month. Any amounts paid or reimbursed by a third party, including but not limited to: point of service rebates, manufacturer coupons, manufacturer debit cards or other forms of direct reimbursement to an insured for a product or service, will apply towards deductible and/or out-of-pocket maximum, to the extent permitted under state and federal law. USPSTF A & B recommended preventive drugs obtained with a prescription, including OTC drugs, are covered with no member cost-sharing. Drugs and drug tiers on the formulary may change with notice.
	Preferred brand drugs	\$75 <u>copay</u> , <u>Deductible</u> does not apply at retail, \$225 <u>copay</u> , <u>Deductible</u> does not apply for mail order.	50% <u>coinsurance</u> at retail, mail order not covered	
	Non-preferred brand drugs	\$150 <u>copay</u> , <u>Deductible</u> does not apply at retail, \$450 <u>copay</u> , <u>Deductible</u> does not apply for mail order.	50% <u>coinsurance</u> at retail, mail order not covered	
	Specialty drugs and Oral Chemotherapy drugs	Specialty Generic drugs: 20% <u>coinsurance</u> , <u>Deductible</u> does not apply Specialty Brand drugs: 30% <u>coinsurance</u> , <u>Deductible</u> does not apply	Not covered at retail, mail order not covered	Specialty drugs are limited to drugs on the specialty drug list and must be obtained from a designated vendor.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, and Other Important Information
		Network Provider (You will pay the least)	Out-of-Network Provider (You will pay the most)	
		Oral Chemotherapy drugs: 30% coinsurance, Deductible does not apply		
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	30% coinsurance	50% coinsurance	None
	Physician/surgeon fees	30% coinsurance	50% coinsurance	None
If you need immediate medical attention	Emergency room care	30% coinsurance	30% coinsurance	Out-of-network services follow in-network benefits.
	Emergency medical transportation	30% coinsurance	30% coinsurance	Out-of-network services follow in-network benefits.
	Urgent care	\$50 copay/per visit, Deductible does not apply	\$50 copay/per visit, Deductible does not apply	Out-of-network services follow in-network benefits.
If you have a hospital stay	Facility fee (e.g., hospital room)	30% coinsurance	50% coinsurance	None
	Physician/surgeon fees	30% coinsurance	50% coinsurance	None
If you need mental health, behavioral health, or substance abuse needs	Outpatient services	\$50 copay/per visit, Deductible does not apply	50% coinsurance	None
	Inpatient services	30% coinsurance	50% coinsurance	None
If you are pregnant	Office visits	No charge	50% coinsurance	Depending on the type of services, a copayment, coinsurance, or deductible may apply.
	Childbirth/delivery professional services	30% coinsurance	50% coinsurance	None
	Childbirth/delivery facility services	30% coinsurance	50% coinsurance	None
If you need help recovering or have other special health needs	Home health care	\$50 copay/per visit, Deductible does not apply	50% coinsurance	120 visit(s) per benefit year

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, and Other Important Information
		Network Provider (You will pay the least)	Out-of-Network Provider (You will pay the most)	
	<u>Rehabilitation services</u>	\$50 <u>copay</u> /per visit, <u>Deductible</u> does not apply	50% <u>coinsurance</u>	None
	<u>Habilitation services</u>	\$50 <u>copay</u> /per visit, <u>Deductible</u> does not apply	50% <u>coinsurance</u>	None
	<u>Skilled nursing care</u>	30% <u>coinsurance</u>	50% <u>coinsurance</u>	120 day(s) per benefit year
	<u>Durable medical equipment</u>	30% <u>coinsurance</u>	50% <u>coinsurance</u>	None
	<u>Hospice services</u>	No charge	50% <u>coinsurance</u>	Respite care is limited to 5 day(s) per episode and respite care and continuous care combined are limited to 30 day(s).
If your child needs dental or eye care	Children's eye exam	No charge	50% <u>coinsurance</u>	None
	Children's glasses	30% <u>coinsurance</u>	Not covered	Limited to one pair of eyeglasses (lenses and frames) or one pair of contact lenses per benefit year.
	Children's dental check-up	No charge	50% <u>coinsurance</u>	None

Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)			
• Acupuncture	• Infertility treatment	• Private-duty nursing	
• Bariatric surgery	• Long-term care	• Routine foot care	
• Cosmetic surgery with the exception of port wine stain removal and reconstructive surgery	• Non-emergency care when traveling outside the U.S.	• Weight loss programs	
• Dental care (Adults)	• Non-formulary drugs without a formulary exception		

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)	
• Abortion	• Hearing aids
• Chiropractic care	• Routine eye care (Adult)

Your Rights to Continue Coverage: There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is: Your plan at 1-800-883-2177 or the MN Dept of Health at 651-201-5100 / 1-800-657-3916. If your plan is subject to ERISA; contact the US Department

of Labor's Employee Benefits Security Administration at 1-866-444-EBSA (3272), or www.dol.gov/ebsa/healthreform. If your plan is not subject to ERISA, contact the US Department of Health and Human Services, Center for Consumer Information and Insurance Oversight, at 1-877-267-2323 x61565 or www.cciio.cms.gov. Other coverage options may be available to you too, including buying individual insurance coverage through the Health Insurance Marketplace. For more information about the Marketplace, visit www.mnsure.org or call 1-855-366-7873.

Your Grievance and Appeals Rights: There are agencies that can help if you have a complaint against your plan for a denial of a claim. This complaint is called a grievance or appeal. For more information about your rights, look at the explanation of benefits you will receive for that medical claim. Your plan documents also provide complete information to submit a claim, appeal, or a grievance for any reason to your plan. For more information about your rights, this notice, or assistance, contact: Your plan at 1-800-883-2177 or the MN Dept of Health at 651-201-5100 / 1-800-657-3916. For group health plans subject to ERISA, the US Department of Labor's Employee Benefits Security Administration at 1-866-444-EBSA (3272), or www.dol.gov/ebsa/healthreform.

Does this plan provide Minimum Essential Coverage? Yes.

Minimum Essential Coverage generally includes plan, health insurance available through the Marketplace or other individual market policies, Medicare, Medicaid, CHIP, TRICARE, and certain other coverage. If you are eligible for certain types of Minimum Essential Coverage, you may not be eligible for the premium tax credit.

Does this plan meet Minimum Value Standards? Yes.

If your plan doesn't meet the Minimum Value Standards, you may be eligible for a premium tax credit to help you pay for a plan through the Marketplace.

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al 1-866-398-9119.

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-883-2177.

Chinese (中文): 如果需要中文的帮助, 请拨打这个号码 1-800-883-2177

Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwijjigo holne' 1-800-883-2177.

—————To see examples of how this plan might cover costs for a sample medical situation, see the next section.—————

About these Coverage Examples:



This is not a cost estimator. Treatments shown are just examples of how this plan might cover medical care. Your actual costs will be different depending on the actual care you receive, the prices your providers charge, and many other factors. Focus on the cost sharing amounts (deductibles, copayments and coinsurance) and excluded services under the plan. Use this information to compare the portion of costs you might pay under different health plans. Please note these coverage examples are based on self-only coverage.

Peg is Having a Baby

(9 months of in-network pre-natal care and a hospital delivery)

■ The plan's overall deductible	\$4,000
■ Specialist copay	\$50
■ Hospital (facility) coinsurance	30%
■ Other coinsurance	30%

This EXAMPLE event includes services like:

Specialist office visits (*prenatal care*)
 Childbirth/Delivery Professional Services
 Childbirth/Delivery Facility Services
Diagnostic tests (*ultrasounds and blood work*)
Specialist visit (*anesthesia*)

Total Example Cost **\$12,700**

In this example, Peg would pay:

<u>Cost Sharing</u>	
<u>Deductibles</u>	\$4,000
<u>Copayments</u>	\$0
<u>Coinsurance</u>	\$2,500

What isn't covered

Limits or exclusions	\$70
The total Peg would pay is	\$6,570

Managing Joe's Type 2 Diabetes

(a year of routine in-network care of a well-controlled condition)

■ The plan's overall deductible	\$4,000
■ Specialist copay	\$50
■ Hospital (facility) coinsurance	30%
■ Other coinsurance	30%

This EXAMPLE event includes services like:

Primary care physician office visits (*including disease education*)
Diagnostic tests (*blood work*)
Prescription drugs
Durable medical equipment (*glucose meter*)

Total Example Cost **\$5,600**

In this example, Joe would pay:

<u>Cost Sharing</u>	
<u>Deductibles</u>	\$900
<u>Copayments</u>	\$900
<u>Coinsurance</u>	\$0

What isn't covered

Limits or exclusions	\$20
The total Joe would pay is	\$1,820

Mia's Simple Fracture

(in-network emergency room visit and follow up care)

■ The plan's overall deductible	\$4,000
■ Specialist copay	\$50
■ Hospital (facility) coinsurance	30%
■ Other coinsurance	30%

This EXAMPLE event includes services like:

Emergency room care (*including medical supplies*)
Diagnostic test (*x-ray*)
Durable medical equipment (*crutches*)
Rehabilitation services (*physical therapy*)

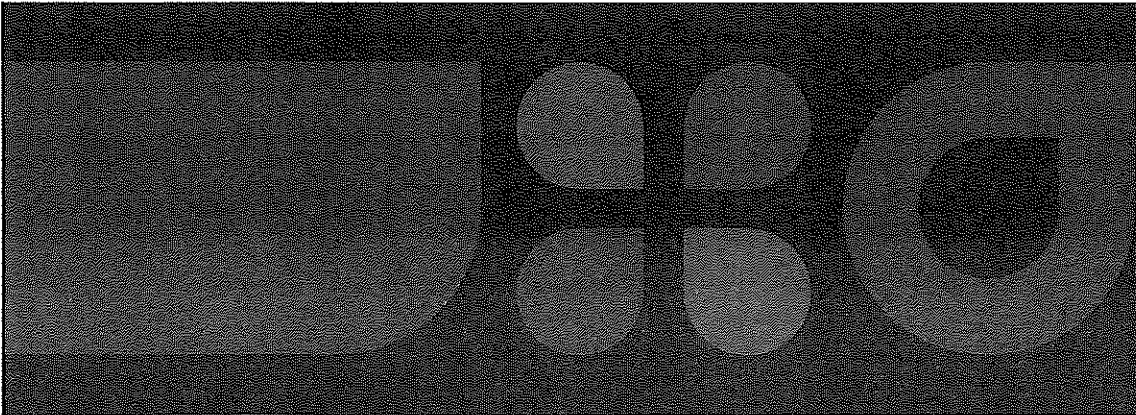
Total Example Cost **\$2,800**

In this example, Mia would pay:

<u>Cost Sharing</u>	
<u>Deductibles</u>	\$2,300
<u>Copayments</u>	\$300
<u>Coinsurance</u>	\$0

What isn't covered

Limits or exclusions	\$0
The total Mia would pay is	\$2,600

The HealthPartners logo is displayed in a dark, textured banner. It consists of a large 'H' on the left, followed by four small circles arranged in a 2x2 grid, and a large 'P' on the right.

**Questions about
your renewal?**

Contact your broker or
account manager.

XVIII. DEPARTMENT OFFICERS – ELECTIONS / DUTIES / REMOVALS / VACANCIES

- A. The following Department officers shall be elected by the BFD membership: Fire Chief, Assistant Fire Chief, and four Captains.
1. The Fire Chief, Assistant Fire Chief shall be elected the 2nd Tuesday in October in the even numbered years and shall hold office for the term of two years.
 2. Two Captains shall be elected on the 2nd Tuesday in December in the even numbered years and shall hold office for the term of two years.
 3. Two Captains shall be elected on the 2nd Tuesday in December in the odd numbered years and shall hold office for the term of two years.
 4. The appointment of all officers elected by the members of BFD shall be confirmed by the Town Board before the officers take office.
 5. Terms of office begin January 1st and run for two consecutive years.
- B. Nominees must meet the minimum qualifications for the positions as defined elsewhere in this Handbook. Interested parties should submit their names directly to the Fire Chief who will post and create ballots. The following are submission deadlines:
1. For Fire Chief and Assistant Chief, submissions of interest are due by the 2nd Tuesday in September, with voting to occur at the 2nd Tuesday of the October meeting.
 2. For the 2 Captains positions of even years, submissions of interest are due by the 2nd Tuesday in November, with voting to occur at the 2nd Tuesday of the December meeting.
 3. For the 2 Captains positions of odd years, submissions of interest are due by the 2nd Tuesday in November, with voting to occur at the 2nd Tuesday of the December meeting.
 4. Lieutenants are appointed by the Fire Chief. Interested parties should submit a letter of interest to the Fire Chief 2 weeks prior to December 15th of the current year. Lieutenants are appointed annually.
- C. Voting will take place at the Baldwin Fire Station. Each position shall have at least 51% of the quorum for election. Absentee ballots will be made available at the Baldwin Town Hall Office 1 week prior to voting and must be returned by the Tuesday night of the election.
- D. Any BFD officer may be removed from office by a majority vote of the BFD members at any regularly scheduled BFD meeting for willfully neglecting his/her duties, abuse of his/her authority, or any of the Standards of Conduct listed in this Handbook.
- E. When an elected office becomes vacant in any way, the office shall be filled for the unexpired term by an election at the meeting at which the vacancy is established. Nominations may be made from the floor.
- F. Nothing in this Handbook shall prohibit the Town Board from acting on its own from removing any BFD officer or firefighter from his/her position with the Department pursuant to the applicable local, state, and federal rules, regulations, and laws.

- G. A quorum consists of a majority of regular non probation members in good standing.
- H. A firefighter must be in good standing the past calendar year to be eligible to vote. A Probationary Firefighter who has come off probation prior to the election will be allowed to vote.

Kayla Nielsen

From: Abby Newland <abby@finalleehome.com>
Sent: Thursday, May 14, 2026 10:09 AM
To: Kayla Nielsen
Subject: Re: Baldwin/ PC Resignation

Follow Up Flag: Follow up
Flag Status: Flagged

Dear Members of the Baldwin Planning Commission,

It is with a very heavy heart that I submit my resignation from the Baldwin Planning Commission.

Serving on this board has truly been an honor. I am incredibly grateful for the opportunity to work alongside such dedicated individuals who genuinely care about the future and growth of our community. The relationships, experiences, and lessons I have gained during my time on the commission will stay with me for years to come.

Unfortunately, due to my upcoming move out of the city, I am no longer able to continue serving in this role. While I know this is the right decision, it is not an easy one for me to make. Baldwin has meant so much to me, and being part of the Planning Commission has been one of the most rewarding ways I have been able to give back to the community.

Thank you all for your support, collaboration, and friendship throughout my time on the board. I have tremendous respect for the work you do, and I know the commission will continue to make thoughtful and positive impacts on the city.

Wishing you all the very best moving forward.

Sincerely,
Abby Newland

On Thu, May 14, 2026 at 9:56 AM Kayla Nielsen <deputy.clerk@baldwinmn.gov> wrote:

Hi Abby -

Just sending you a reminder to send me your resignation letter when you get a chance.

Thank you

Kayla Nielsen