

**Beatty Town Advisory Board  
100 A Avenue South  
P.O. Box 837  
Beatty, NV 89003**

**Minutes  
03/11/19**

**THE BEATTY TOWN ADVISORY BOARD MET IN REGULAR SESSION AT 6:30 PM IN THE BEATTY COMMUNITY CENTER.  
THE BEATTY TOWN ADVISORY BOARD HEREAFTER WILL BE REFERRED TO AS THE (BTAB)  
THE BEATTY TOWN ADVISORY BOARD MEMBERS HEREAFTER WILL BE REFERRED TO AS THEIR RESPECTIVE INITIALS.**

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**Dick Gardner (DG) – Chair  
Randy Reed (RR) – Vice Chair  
Erika Gerling (EG) – Treasurer  
Kelly Carroll (KC) – Member**

**1 Pledge of Allegiance**

Meeting called to order 6:30pm

**2 GENERAL PUBLIC COMMENT (Three-minute time limit per person.) Action will not be taken on the matters considered during this period until specifically included on an agenda as an action item.**

Tim Dahl; Nye County Public Works Director – Stated, Nye County in its entirety but primarily in Pahrump is going to have a hazardous household waste disposal day. I wanted to announce that we are putting together a day where we can all bring in our unknown or labeled hazardous materials, stuff we don't know what it is fireworks that you have from years ago, fuels whatever. It will be May 18<sup>th</sup> in Pahrump at the Pahrump land fill on Mesquite road, 7am to 4pm, it's on a Saturday. There will be some flyers come out, so I'll get them to you in the near future.

**3 Approval of the Agenda for the BTAB meeting of February 11, 2019**

*Staff pulled items 4 and 5.*

**4 For Possible Action – Approval of the minutes dated; February 25, 2019**

*Pulled*

**5 Emergency Items**

*Pulled*

**6 Presentation/Introduction of First Person Care Clinic by Roxana Valetton CEO and John Williams Director of Business Affairs – Our goals and reasoning for going to Beatty and the surrounding area. Possible mobile clinic when needed, seeing if the need is there for a clinic and learning more about the town of Beatty. Our website is: [www.firestpersoncc.org](http://www.firestpersoncc.org) – First Person Care Clinic; John Williams Director of Business Affairs.**

John Williams – Stated First Person, we are a non-profit medical center. We assist anybody and everybody, low income to primary care, the best insurances, we take most insurance. We are investigating to come up here and bring some good health care. If you see on your flyer we have a lot of things that we do at this time. We're even talking about a mobile unit, bringing a mobile unit up and maybe some temporary dental care. We do work on a sliding pay scale, so if you only make this much money you're only going to pay that much money but like I say we do take all insurances. We are up here to see if the need is here and I believe the need is here. We talked to business owners, Judges and everybody is positive. They said John come up and talk to the Board. Do you have any questions?

DG – Asked have you looked at any buildings or facilities?

Mr. Williams – Stated we know that you have a clinic and I took a tour of the clinic. Dr. Reiner let us go through. I'm very impressed, a lot of the equipment is outdated, that we can't use, like the x-ray machines. We're thinking about it and we got a very positive vibe. We'd like to work something out with the clinic but there are a couple of locations that they gave us, a couple of modular homes. I don't know what street, they used to be medical centers, you guys probably know what I'm talking about. Our goal is to come up here and assist and be the primary care for you guys so you don't have to go to Pahrump, Tonopah and Goldfield. Sure we'd have to take baby steps at first, come up and test the water and you guys got to make sure that you feel safe with us. We are a Federal qualified health clinic. That gives us the right and the privilege to help the low income, there's only 6 or 7 in town. Roxanne is the CEO, we have two locations we have in Henderson and Las Vegas and we are growing really fast. We understand we might only see 8 to 10 patients a day here, it's not a gold mine but that's not what we're here for. If we can see 8 to 10 here, bring a mobile unit out, we can hit Goldfield, Tonopah but we will grow with the city. I know you guys' problems, I guess, in the past promises that weren't made. We're not here to make any promises; we're there to take baby steps. Come here maybe one or two days a week, work with you and what you want, try to work with you. We're not here to take over anybody's business. I know the need is here for a kind of quick care place, but we're not a quick care medical center, we're not. We're mainly a primary. I know that you are looking into that Roxanne, we had a good meeting a little while ago and they explained exactly what they would like to have here.

EG – Stated sorry to interrupt, who are they?

## BTAB Minutes 03/11/19

6 Presentation continued

Mr. Williams – Stated it was the Bureau of Healthcare and Welfare. They were really nice and they went over... they would like to see 5 days a week and maybe a new x-ray machine so you guys don't have to travel to the nearest city. I don't know what the nearest city would be, Las Vegas or Tonopah. Is Pahrump the closest one?

Roxanne – Stated thank you again for having us here and let us explain a little bit who we are and what we can do to help. Like John was explaining, we are a non-profit; we have been working for 6 years. We got our status as a FQHC (Federally Qualified Health Center) just almost 2 years ago. Before that even though we were a non-profit we were sustainable, which is a good thing because some non-profits when they come to small towns like this one they are expecting to see 50 clients a day or 30. We cannot come here thinking about that right now but the need is here and we know that we cannot expect 30 patients a day. So we need to find ways to be sustainable without counting that the patient is going to appear. Because most of the people in the area, they have Medicaid or maybe they don't have any insurance. So we need to know what type of population. I'm the one that writes the grants in our organization and I pulled some reports and I think the numbers are kind of low. They said that we have 700 people living at this moment; I think you have more but I'm not quite sure and they said that almost 300 they are underserved and Nevada Health Center is taking care of 94% of the population. So, when I write grants I have to show them that there is a need that haven't been met and how it looks right now, it looks like Nevada Health Centers is taking care of pretty much everybody in town, which it might be true but if you have instead of 700, we have 1,000, I might bring in the mobile unit, we can bring in more specialists. Because they might not want to move here in town, because even in Las Vegas, they also sometimes have a specialist once a month as well. So we can do this through a mobile unit, that way we have the clinic, we can have a provider full time, if we get some grants and maybe we can bring a dentist, because we have a dental clinic as well, we can bring a pulmonologist once a month, we can bring different providers, that way we can see, pretty much, anybody here. So, we have those two options, but it is really important, now there is a grant... tomorrow is the first time... it's a two year grant and then in April we have to submit the full application, is to open up a new access point, which means a new clinic. Normally they give the clinics to rural areas and underserved areas, but the numbers they need to match. Because there are thousands of applications, if I say that I'm going to serve only 1,000, in a place that the medical center is pretty much seeing everybody who is underserved, they (grant) might not see the need even though the need is here. So that is why I would like to see if we consider mobile. With the mobile unit we can go, maybe, to Tonopah, maybe some days to Pahrump, that way I can prove more numbers. I can say that maybe we are going to the schools, not only here but maybe Goldfield and the smaller towns around this area, that way we can make it work. That's really important for us to be able to buy new equipment, an x-ray machine costs from \$15,000.00 to \$20,000.00, a digital one. In my opinion, we don't want to receive an x-ray machine that we have to send the films out and it takes like two weeks to receive the results. I already have a digital one so we send it out and within a couple of hours they can have the results. I think that's good care, if we bring the results a week after, that's a liability, the patient having to wait a long time I don't think is a good thing. So, I think we should apply for grants and making sure, in our meeting before, I can apply for this grant, see if we can get some money from the Federal Government, to say that we are the only practitioner full time but also MA's and an administrator. Whatever we do Doctors will have to be in from the outside, but we will encourage to try to hire people from this town, that way they can have a job. MA's don't have to travel to Pahrump if they have the clinic here they can work here with us. So, that's not only to open a clinic up, also to create jobs, that's why we are here too. We heard many stories about what happened before and like John said we just want to try, we won't make any promises, we are not here asking for money, from the city or from anybody because we understand that it's really hard, and I think we have to do for ourselves, what we can do for the community here and most importantly even though we're going to cover our basics, we would like to know more about the kids, what they need, adults what they need, tourists what they need and that way you end up with a primary, we might add maybe an urgent care provider who has experience also in urgent care settings, instead of just adding a family doctor that maybe our kids, they got a cut and the doctor is going to say no, I'm not ready, I don't know how to do that, or I don't feel comfortable. So if we bring in an urgent care provider then they can do all of that.

Our non-profit also offers to providers, they can apply for the service corps and they can get their loans repaid, especially if they work in the rural areas. So what we can do is we can be providers in any of the States and they have to work there two to three years in order to get their loan repaid. So there are many ways that we can promote that we have a clinic here and we can bring providers.

DG – Clarified, you said you have a mobile clinic?

Roxanne – Replied no. If we apply for this grant I would recommend on top of the main clinic which is the most important part of the service here, a mobile unit to bring providers.

DG – Stated I misunderstood, sorry about that.

Roxanne – Went on, so we'll have a fulltime person here, plus we'll bring in more providers.

DG – Asked, why do you think that you could rent space, or use space from Reiner up there at the Clinic? He's in there trying to make money from the patients that he brings in. I know he only comes up here on a... once a month, but he has somebody there to do the tele-medicine stuff. So, I don't understand why he would want to rent or sublet space in the clinic for somebody else to come up here and work. It just doesn't make sense to me. I'm probably missing something but...

## BTAB Minutes 03/11/19

Roxanne – Stated, well... I don't know how...if you come once a month I don't think you are providing good services, I don't think...

DG – Stated he only comes once a month the clinic is open every day. There is a nurse staff that handles everything.

Roxanne – Stated I think we were talking to Dr. Reiner and actually John is the one that was talking to him and the thing is that we didn't get good feedback from everybody and so we don't really know if we can share space. We just want to help. We're not here just to... we're not looking for, we're not here to make profit from our patients.

DG – Replied, but if you're not there to make profit, Dr. Reiner is, okay. He's not my doctor don't get me wrong, I just...

Roxanne – Stated we need to make money in order to stay sustainable but in the small towns you cannot think like you're going to make money when you just start. You have to pay (inaudible) for free and then if there is business, then you get the business. If there is none your goal shouldn't be to make money because... That's why it's so important for us to get grants, that way, they won't cover everything but if they cover 30 or 40% that's... because we have other clinics. We as a non-profit, whatever money we make it's not for our pockets, we invest in the community, and we help people.

EG – Clarified, so you've spoken with Beatty Health and Welfare, right? Because the Advisory Board is not the signature on the contract for the clinic or the medical services, so you've spoken to Beatty Health and Welfare, can you tell us anything?

Jim Weeks; Beatty Health and Welfare Board Member – Stated, no decisions have been made, nothing is... They made a presentation similar to yours and we just listened to it and they're going to submit something in writing and we're going to look it over and see. Anything to improve the quality of the medical services in town, we're in favor of. There's a lot of things that got to be worked out.

Roxanne – Stated we are flexible; we can work with another provider. Actually the more providers you have the better.

EG – Clarified, you also spoke with Dr. Reiner?

Mr. Williams – Stated I met with him personally; I invited him to come (to this meeting). Our main objective was teaming up and he was open arms for us and then all of sudden he quit talking to us. Our main... we never wanted to step on anybody, that's why we invited him up for tonight and we just want to partner with him, that's what the whole thing was and then we started to hear stuff, and you know you can't believe everything you hear, but we're here to represent ourselves, not Dr. Reiner. We know, but he was a good gentleman, he treated us really good, no hard feelings, we just didn't ... I invited him to come.

EG – Stated well I spoke with Dr. Reiner on Saturday, I guess, he was here in Beatty and he was onboard with the mental health part of your proposal or your proposal but I guess where he had an issue was he's the provider right now and then you guys want to be primary care provider, so I think that's where the tension came in.

Roxanne – Stated but actually they asked us to bring more providers, he said he didn't have time to visit here every day.

EG – Clarified, Dr. Reiner asked you that?

Roxanne – Stated he told us that he can come once a month only.

Mr. Williams – Stated he wanted to team up with us. We told him we're not you know and Joni and I were sitting right there and it was a very good conversation, very positive, and then all of sudden it stopped. I don't know why, he had second thoughts, that's fine.

Roxanne – Stated we just need to know how many days would you want us to be here, if you want. Because that way when I write grants, depending on how many days you need us is the money I can ask for. And how many patients, how many specialties.

EG – Stated let me ask another question. So your two clinics in Las Vegas are they federally funded grant programs? About what percentage of your costs is covered by the grants?

Roxanne – Stated by the grants, now we have like 35, 40.

EG – Replied, okay and you guys are able with these two clinics in Las Vegas to be sustainable with 35% grant funding?

Roxanne – Stated the thing is that we are open for six years, so when I took over a few years ago I wrote a grant to add a second location.

EG – Stated, okay so right now you are in a grant cycle and you want to write a grant to be able to provide services in Beatty, when is the grant deadline.

Roxanne – Stated April 15<sup>th</sup>. I already submitted my first tier of the application today...

EG – Clarified, for Beatty? With Beatty in it?

Roxanne – Stated I just listed a couple of SIC codes I added Tonopah, Beatty, just to see what they have to say. Because they have to check how many people have applied, in how many zip codes and I can say I pulled the data and it shows that, I mean I know that it isn't here but what it says in the data, that it is being covered by Nevada Health Centers.

EG – Stated we don't have Nevada Health Centers anymore; discussion followed.

## BTAB Minutes 03/11/19

Roxanne – Stated I'll send documentation because the data that the government checks, so if I do grants I cannot go anywhere, but I talked to Nevada Primary Care Association and I asked if I can get a document from the city that shows that actually they don't have 700 they have 1,000 or close to 1,000, they are not accurate numbers. Because if the need is 1,000, if I only do 700, it's not okay, maybe we get money from... they pay you for the uninsured and underserved but it's not the same for 1,000 from 700. You might have right now 400 individuals that need essentially free care. If we can get a letter with the actual number that's going to be helpful on my second part of the application all depends if you can support us. Because I can change, the first year is just to open the (inaudible) but I can change that, so it all depends on if we get a letter of support from the city, we cannot grow if we do not have your help.

DG – Asked for questions from the audience.

Perry Forsyth – Stated there are two kinds of levels in medical care, non-emergency and emergency and our ambulance service is covering a very wide area right now. Is your clinic capable to take care of emergency situations like trauma associated with car accidents and stuff like that? I don't know what your level of care is going to be. Do you have PA's that can do cut downs if they have to do an IV and they can't get it nowhere else or do a bump stick or whatever?

Roxanne – Stated our clinics, they don't treat emergencies, just hospitals and urgent cares. If you have a stroke or a heart attack you have to go to the hospital, you cannot get treated in an emergency setting. But like I was saying, if we can bring a provider that has experience working in emergency in a hospital setting they can do more. And IV, we are doing IV at our clinics. We see patients with diseases, so we have nurses that are trained for that, we do IV's even for hydration or for anything that is... if a person has a stroke our doctors are there and when the ambulance comes they can do something to make sure they get to the hospital in time.

Mr. Forsyth – Stated what we always used the clinic for was to stabilize the patient and then we could make a determination, do we fly them out or haul them out. It's not that I was thinking of using you as a final stop, you know, you're not a hospital. But if you could just stabilize the patient, would that be possible in your future clinic?

Roxanne – Stated it's possible, actually like I said, in small towns we need to see what do you need and then go from there. So, we will cover the basics but if we know because of your experience that we have a lot of people that has a broken bone or accident then maybe we can do something to help with that. In case they need to stay there for a couple of hours, you know we can bring in resources and additional providers, the provider needs to be trained on that because some providers, because of the liability, they don't want to do a lot of things. So I won't bring a provider here that they just do preventative medicine, you can't have that here, we need a good provider. It doesn't matter if it a Practitioner or an MD, or any combination but they have to have the expertise, it's not like an emergency, emergency, it's not the final stop but we need to know how to handle it.

Mr. Forsyth – Agreed, not a final stop, just stabilization.

Roxanne – Stated I think we can do that. Instead of putting money in everything else I think we should invest small money making sure we cover those accidents.

Mr. Forsyth – Stated I was going to ask you can foresee what I'm talking about and allocate in your mind a perspective amount of funding that you would be needing on your federal grant.

Roxanne – Stated okay the grant I'm talking to you (about) is one of the biggest ones it's \$650,000.00 per year. The provider so you know, providers are really expensive, doctors cost from \$100.00 to \$150.00 per hour. Some of them cost \$200.00 to \$300.00 depending on their specialty, and also we have to pay taxes, insurance, they cost a lot of money. But, like I said if we have some funds, instead of hiring three people if we hire one or two good ones that way we guarantee that there's no type of emergency at least for a couple of hours before you get an ambulance. So we'll distribute the money here differently if we get the grant. Instead of hiring 10 people we might hire 5 but they have to be really good.

Mike Harmon – Basically what Perry's asking is if you guys can become an emergency room because that's the only way an ambulance can go to the clinic is if it's an emergency room.

Roxanne – Stated well, emergency room is in the hospital setting only.

Chief Harmon – Stated exactly, the law says if we pick you up we can only take you to the nearest emergency room, we can't take you to a clinic.

Roxanne – Replied yeah but if someone goes to the clinic.. If you are at home and you get scared you are going to do anything for your family, if they come to the clinic maybe we can stabilize that patient and then the ambulance come and then they might have better chances.

Chief Harmon – Agreed, right but the ambulance can't take them to your clinic. I can take my wife to your clinic and then the ambulance can go from there but the ambulance cannot go to your clinic, that's the law.

Roxanne – Agreed correct, it's true.

Mr. Forsyth – Stated I'm glad he's here because I got out of the ambulance service in 96, there have been some changes.

Roxanne – Stated if we find out that there's something going on there then we can try to stabilize the patient until we get the ambulance but if you already know they have a stroke you can (inaudible) go to hospital. We need to start on something and demonstrate that there is a need and we can do it. Later on we can even apply and try to do a super care

center. That way people can stay there. Even in hospitals they kick you out in less than a week, maybe two days but they still need medical care and we have a super care center they can spend 30 days, 60 days in that place with nurses.

DG – Stated I think we understand what you're trying to do. With that are there any other questions?

Mr. Williams – Stated tell them about the pharmacy because we have a great pharmacy.

Roxanne – Stated okay, by being a federal qualified center, we have a program that we are allowed to buy almost at cost our pharmaceuticals. Let's say an aspirin costs thirty cents, the pharmaceutical has to sell it to us for twelve or fifteen cents. So if the patient has to take those they only pay those twelve cents and the only thing they pay additional is the pharmacy dispensing fee, maybe \$5.00. We have a lot of clients like, one of our board members, because they have to be consumers, she has an illness and she has to be on an IV every week and she was paying \$850.00 a week. She could not afford it anymore, she found our clinic and in our clinic she gives only \$25.00 and if she cannot afford to pay \$25.00, we do the IV without it. So we are not a free clinic but if the patient has zero dollars we see them regardless.

DG – Stated we've had people tell us before they were thinking about putting a pharmacy in there it never came about.

Roxanne – Stated well we can put a pharmacy, that's our program so let's say we already spoke with our pharmacy and they're willing to send the medication here next day. We also have donations, so we are working with Medicare, will have like a dispensary but it's completely for free. Whatever is available, if the patient has a prescription and they don't have insurance we give 90 day supplies to them and that's completely free.

DG – Asked for additional questions. There were none.

DG – Thanked them for the presentation.

**7 Introduce ourselves, Rainbow Helping Hands Inc. – We are a non-profit mental health clinic that does therapy and drug and alcohol therapy – Rainbow Helping Hands Inc; Joni Stumpf**

Joni Stumpf – Stated we are a non-profit. We are bringing mental health up here as well as drug and alcohol counseling. We have already spoken with Dr. Reiner about using the office. We will be up here on the first and fourth Tuesdays of every month from 9am to 7pm doing drug and alcohol counseling as well as mental health. We have two therapists ready to go, we are introducing our selves. We work in Vegas as well as Pahrump; this will be our third location. We take insurance but we also have sliding scale as well. We do individual as well as family we are working on group therapy.

EG – Clarified you're a separate organization from First Person Care?

Ms. Stumpf – Replied, yes.

EG – Asked you've already made arrangements with Dr. Reiner to do your stuff at the clinic?

Ms. Stumpf – Replied, yes.

Diane McGinnis – Asked will there be any prescribers or any medical, MAT, assisted therapy or is this just therapy?

Ms. Stumpf – Stated it's just therapy, First Person does all of our medical prescriptions.

EG - Asked when are you starting?

Ms. Stumpf – Stated whatever is the 4<sup>th</sup> Tuesday

**8 Board Member's Comments (This item limited to announcements or topics/issues proposed for future workshops/agendas)**

KC; EG; RR; DG – None

**9 Consent Agenda Items – These are items that Staff recommends for approval. The Board reserves the right to move any consent agenda item to the regular segment of the agenda should issues arise that need to be addressed.**

a. For Possible Action – Discussion of any item from the Consent Agenda Items that needs review before a decision is made.

b. For Possible Action – Approval of Town Vouchers

*RR – Motion to approve the town vouchers in the amount of \$2,309.36; EG Second; 4-0*

10 Reports

- i. **Beatty Chamber** – None
- ii. **Beatty Habitat Committee** - None
- iii. **Beatty Library** – None
- iv. **Beatty Medical Clinic** – None
- v. **Beatty Museum** – None
- vi. **Beatty Senior Center** – None
- vii. **Beatty Volunteer Fire/Ambulance** – Chief Harmon stated we had 1 structure fire, it turned into a wild land fire as well and we got a rekindle on it the next day. We had the entire department out there it was a great showing. We also had a couple of guys from Amargosa and a couple of guys from Pahrump help us out with that. Very appreciative of all of them. We've had 2 motor vehicle accidents, 6 medical calls, in the last month.
- viii. **Commissioner's** – None
- ix. **Desert Hills Cemetery** – None
- x. **Nye County Emergency Services** – None
- xi. **Nye County Sheriff's Department** – None
- xii. **Ordinances** – None
- xiii. **Other**
  - Beatty Economic Development, Inc (BEDC)** – None
  - Beatty General Improvement District (BGID)** - None
  - Beatty Water & Sanitation District (BWSD)** – None
  - Beatty Boy Scouts** - None
  - Beatty Health & Welfare** - None
  - Other Community or Civic Organizations** – DG – BUNKO
- xiv. **Secretary** – Carrie Radomski; Town Secretary read flyers received by the office; **the 21<sup>st</sup> Social Security will be here in the Community Center small room from 2pm to 3pm- 23rd at 4pm Elevation Solar will be here**
- xv. **Treasurer**

EG – Stated we had a budget workshop just before. We got some preliminary things, numbers, expenditures, for the chamber and the museum and right now 67% of the year has passed and the bottom line budgets, everybody's good ones very close, the chamber, which we discussed earlier but other than that everything looks good. If you have any questions get a hold of me or Carrie.

11 General Business

- a. **For Possible Action – Discussion, deliberation and decision to submit a request to Nye County Public Works for the installation of no "Engine Brake or Idling" signs at all three entrance points to the Town of Beatty and all matters pertaining there to. Exact wording and placement to be determined by Nye County Public Works. – Jim Henderson; Stage Coach Properties**

Jim Henderson; Casino/Property Manager at the Stage Coach – Introduced himself and stated the Exchange Club is my biggest problem, I get semi-trucks that park back here and they run their engines all night. Even though the new diesels have almost nothing to them they also run refrigerators and the produces diesel smoke and our air conditioners just pull that smoke in so we get a lot of complaints. When they come down off the hill they use their engine brake and everybody in town can hear the engine brakes; Discussion followed.

Tim Dahl; Public Works – Stated it's up to you guys, whatever you want to do. We don't have the authority to put no parking signs up in the county right of ways. My suggestion to Jim when he brought this to my attention after we got some complaints that there were rocks in the right of way and that those pose somewhat of a danger for the motorists, it's just a liability that none of us want to absorb, was to get with the Town Board and see if we couldn't come up with an idea to either put signs on the entrances of town, maybe ask the Board to adopt no parking ordinances in certain areas of town, or no engine brake and no idling are two very good signs that we can easily put on the outskirts, the entrance to town. Basically I will support you guys in whatever you want to do. Talk to NDOT about putting signs out in their right of way, making the signs, I'm here to accommodate whatever you think is best to do.

DG – Clarified, we're talking about all three entrants to tow; Discussion followed.

Mr. Dahl – Suggested we ask NDOT if these signs could be installed on the same pole as our new, "your speed is signs"; Discussion followed.

EG – Clarified, so the sign shop will make the signs if NDOT is okay with that.

Mr. Dahl – Stated I can check with Sami Yousuf with NDOT and see if it's something he will allow me to put up in the right of way, yes. I'll need an idea of what you want them to say; Discussion followed.

Mr. Dahl – Stated I will go off the national recognized, shape size and wording; Discussion followed.

*RR – Motion to make a request to Nye County Public Works for the installation of no engine brakes or idling signs, and for Public Works and NDOT to work together on the ideal spots, how may we need and placement; Second EG; 4-0*

**b. For Possible Action – Discussion, deliberation and decision to advertise for one Beatty Town Advisory Board seat due to the resignation of Crystal Taylor. Letters of interest due by 5pm on March 20, 2019. – Beatty Town Office; Carrie Radomski**

Carrie Radomski; Town Secretary – Stated this is to advertise for an open seat, if you are okay with it I will post tomorrow; Discussion followed.

*RR – Motion to advertise for one Beatty Town Advisory Board seat due to the resignation of Crystal Taylor due to resignation; Second EG; 4-0*

**12 General Public Comment**

None

**13 Adjournment**

*KC- Stated tonight is my final night as a board member. I want to thank the Town immensely it's been an honor, its been a pleasure but I am resigning as of tonight, so thank you.*

*KC - Motion to adjourn 7:30 pm; Second RR; 4-0*