

MEMORANDUM

Agenda Item No. 11(A)(4)

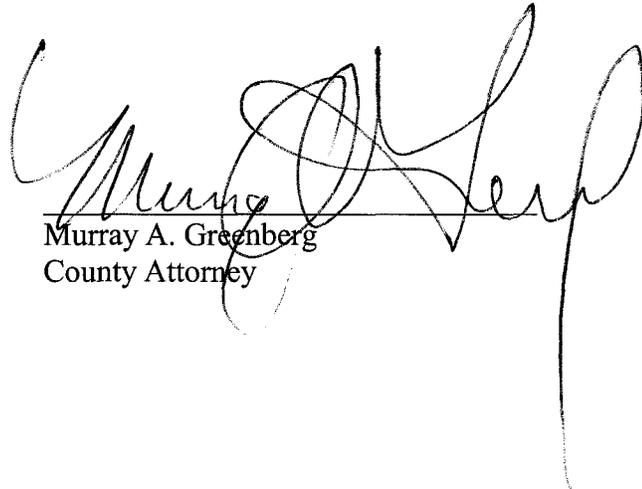
TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: February 21, 2006

FROM: Murray A. Greenberg
County Attorney

SUBJECT: Resolution retroactively
authorizing in-kind services
for the South Florida Golf
Association's Miccokeke
Championship Nationwide
Tour

The accompanying resolution was prepared and placed on the agenda at the request of Senator Javier D. Souto.



Murray A. Greenberg
County Attorney

MAG/jls



MEMORANDUM

(Revised)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: February 21, 2006

FROM: Murray A. Greenberg
County Attorney

SUBJECT: Agenda Item No. 11(A)(4)

Please note any items checked.

- "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- 6 weeks required between first reading and public hearing
- 4 weeks notification to municipal officials required prior to public hearing
- Decreases revenues or increases expenditures without balancing budget
- Budget required
- Statement of fiscal impact required
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Approved _____ Mayor

Agenda Item No. 11(A)(4)

Veto _____

02-21-06

Override _____

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE POLICE DEPARTMENT AND THE MIAMI-DADE FIRE RESCUE DEPARTMENT FOR THE OCTOBER 17-23, 2005 SOUTH FLORIDA GOLF ASSOCIATION'S MICCOSUKEE CHAMPIONSHIP NATIONWIDE TOUR EVENT IN AN AMOUNT NOT TO EXCEED \$8,131.50 TO BE FUNDED IN PART FROM THE COUNTYWIDE IN-KIND RESERVE FUND AND IN PART FROM THE FIRE RESCUE DISTRICT BUDGET

WHEREAS, the South Florida Golf Association has requested in-kind services from the Miami-Dade Fire Rescue Department for the October 17-23, 2005 Miccosukee Championship Nationwide Tour Event in an amount not to exceed \$8,131.50 (see attached Fee Waiver/In-Kind Service Application); and

WHEREAS, the Miccosukee Championship Nationwide Tour Event is a special event, as that term is defined in the attached Fee Waiver/In-Kind Service Application, and \$2,146.50 of the in-kind services shall be funded in part from the Countywide In-kind Reserve Fund and \$5,985.00 of the services shall be funded from the Fire Rescue District Budget,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board retroactively authorizes in-kind services from the Miami-Dade Police Department and the Miami-Dade Fire Rescue Department for the October 17-23, 2005 Miccosukee Championship Nationwide Tour Event in an amount not to exceed \$8131.50 to be funded in part from the Countywide In-kind Reserve Fund and in part from the Fire Rescue District Budget.

The foregoing resolution was offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

Joe A. Martinez, Chairman	
Dennis C. Moss, Vice-Chairman	
Bruno A. Barreiro	Jose "Pepe" Diaz
Audrey M. Edmonson	Carlos A. Gimenez
Sally A. Heyman	Barbara J. Jordan
Dorrin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 21st day of February, 2006. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF COUNTY
COMMISSIONERS

HARVEY RUVIN, CLERK

Approved by County Attorney as
to form and legal sufficiency.

DDC

By: _____
Deputy Clerk

Diamela del Castillo

To: Pam Regula
Special Events Staff

quit
C/O
Bernardo
Conn. Jouto
305-222-2120

From: Emma Piper
Missoula Championships

305-586-3425

Pages - 10 pages
Fax # - 305-375-3968

Please review -

Metro Dade Police	\$ 2,146.50
Fire Dade Rescue	5,985.00
Total:	\$ 8,131.50

If you have any question - feel
free to give me a call @ 305-586-3425
If I have missed any info to you,
please give me a call -

Thanks!
EPI.

**MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION**

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Special Events Staff
Communications Department
111 N.W. 1st Street, Suite 2510
Miami, FL 33128

Phone: (305) 375-2836
Fax: (305) 375-3968

Type of Event/Application (select one of the following):

- District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- Special Event - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
- Major Event - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

1. Full legal name of the requesting organization: South Florida Golf Foundation, Inc.

2. Applicant Status: (Select one of the choices below)

- Not-For-Profit or Tax Exempt
- For-Profit
- County Sponsored Event/Sponsoring Department
- Other (specify): _____
- Local Government or Public Entity

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): epiper@fopcchampionship.com
Emma Piper 305-477-4653 x105
4400 NW 87 Ave Doral, FL 33178

4. Specify fee waiver or in-kind service requested (quantify, if applicable):
Miami Dade Fire Rescue (attached)
Metro-Dade (attached)

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): Oct 7-23, 2005
Miccossah Championship, Nationwide Tour event
Completion - Professional Golfers
Raised money for Local South Florida Charities
American Red Cross March of Dimes Miccosah Educational Fund
Susan Korman Breast Cancer Miami Dade County Parks

6. Please select ALL that apply to event:

- Economic Development:** Event supports vitality or growth of the local economy
- Youth/Education:** Event benefits youth of any age and/or offers educational benefits
- Health and Social Services:** Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- Arts and Culture:** Event supports music, theatre, literature, art or culture
- Environmental:** Event benefits environmental concerns or promotes conservation
- Sports and Athletics:** Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)): _____
6461 Kendall Lakes Dr Kendall FL 33183

MIAMI-DADE COUNTY
FEE WAIVER-IN-KIND SERVICES APPLICATION

8. Description of regional or local impact: Retail Sales, Food/Restaurant Sales,
PR - Radio/Newsprint, Local/National Golf Channel
Live Broadcast 130-4pm Thu-Sun.
Hotels - Shopping, Merch Sales.
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): Attached
10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): Attached
11. Expected number of participants and estimated attendance (per day, if applicable): 500/day
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): Local sponsorship.
Expense Budget \$250,000

I hereby certify that all the statements made in this application are true and correct.

Erna J. Orr, Tournament Director
Signature of Authorized Representative

10-6-05
Date

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MONDAY, OCTOBER 17
NATIONWIDE TOUR Professionals Practice Round

TUESDAY, OCTOBER 18
1st Tee Miami
Junior Golf Clinic
presented by
Coca-Cola
Hosted by Charlie DeLucca & Nat Moore
10 AM - 9th Green -Barricuda Golf Course

NATIONWIDE TOUR Professionals Practice Round

WEDNESDAY, OCTOBER 19

PUBLIX PRO-AM
AM/PM SHOTGUN

THURSDAY, OCTOBER 20 - SUNDAY, OCTOBER 23

MICCOSUKEE CHAMPIONSHIP
NATIONWIDE TOUR EVENT
72-Hole Golf Event
Miccosukee Championship Golf Course
Miccosukee Golf & Country Club

Thursday & Friday - 7:30 am - 6:00 pm
Saturday & Sunday - 7:30 am - 4:00 pm

For Tickets & Sponsor Information
888-939-GOLF (4653)
www.miccosukeechampionship.com





Miami-Dade Police Department
Hammocks Station
10000 SW 142 Avenue
Miami, Florida 33186-7317
T 305-363-6800 F 305-363-6898

miamidade.gov

DIRECTOR
Media Relations Bureau
Professional Compliance Bureau
Police Legal Bureau

DEPARTMENTAL SERVICES
Investigative Support Division
Crime Laboratory Bureau
Crime Scene Investigations Bureau
Property and Evidence Bureau

Special Services Division
Central Records Bureau
Community Affairs Bureau
Court Services Bureau
Training Bureau

Psychological Services Section

INVESTIGATIVE SERVICES
Criminal Investigations Division
Domestic Crimes Bureau
Homicide Bureau
Kidnapping Bureau
Sexual Crimes Bureau
Public Corruption Investigations Bureau

Special Investigations Division
Economic Crimes Bureau
Intelligence Bureau
Organic & Specialist Inv. Bureau

POLICE SERVICES
North Operations Division
Miami City Center Bureau
International Section
Northside Bureau
Northwest Bureau

Police Administration Bureau

South Operations Division
Coral Ridge Station
Dorland Station
Midway Station
Agricultural Patrol Section

Uniform Services Division
Airport Station
Police Operations Bureau
Special Patrol Bureau

SUPPORT SERVICES
Administration and Technology Division
Communications Bureau
Information Systems Support Bureau
Systems Development Bureau
Legal and Legislative Services
Municipal Services Unit

Budget, Planning and
Resource Management Bureau

Centralized Services Division
Fleet Management Bureau
Information Management Bureau
Personnel Management Bureau
Training Bureau

PROUDLY SERVING:
The City of Doral
The City of Miami Gardens
The Town of Miami Lakes
The Village of Palmetto Bay

October 6, 2005

Ms. Emma Piper
South Florida Golf Foundation
4400 NW 87 Avenue
Miami, Florida 33178

Dear Ms. Piper:

As per our telephone conversation, the cost for the Off-Regular Duty Police Services that you requested for 54 hours will be \$2,146.50, at a rate of \$39.75 per hour, per officer.

If you need further assistance in this matter, please feel free to call me at (305) 383-6895.

Sincerely,

Sandra Gallagher, Police Officer
Hammocks District Off-Duty Coordinator

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Miami-Dade Fire Rescue Department
Headquarters
Special Events Bureau
Off Regular Duty Services Application

Event Information

Date of Request: 10/6/2005 Application: 10-05-018
Name of Organization: SOUTH FLORIDA GOLF FOUNDATION
Address: 4400 NW 87TH AVE MIAMI FL 33178
City: MIAMI State: FL Zip Code: 33178
Phone: (305) 477-4653 Fax: (305) 477-4914
Type of Event: GOLF TOURNAMENT Estimated Attendance: 600
Site Address: MICCOSUKKE GOLF CLUB 6401 KENDALL LAKES DRIVES, MIAMI FL 33183
Site Contact Person: EMMA PIPER Phone: (305) 477-4653
Date of Service: From: 10/19/2005 To: 10/23/2005
Hours of Operation: From: 8 To: 18

Billing Information

Company / Person Name: SAME AS ABOVE
Address: Federal I.D.#
City: State: Zip Code:
Telephone: () Fax: ()

Type of Service Requested

(Please Check Appropriate Box)

- Firewatch, Rescue Stand-By, New Construction, Movie Shoot, Code Requirements, Concert, Fair / Festival, Sporting Event, Use of Flammable, Meeting, Cooking Tents, Display, Fireworks, Explosive, Other (Specify):

See Reverse Side For Additional Important Information

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**MIAMI-DADE FIRE RESCUE DEPARTMENT
SPECIAL EVENTS BUREAU**

9300 N.W. 41 STREET
MIAMI, FLORIDA 33178
OFFICE (786) 331-5000 / FAX (786) 331-4435

SPECIAL EVENTS ESTIMATE SHEET

Invoice Number: _____ Date: October 6, 2005
Control Number: 10 - 05 - 018 Prepared By: MICHEL ANTOINE

VENDOR INFORMATION

Name: SOUTH FLORIDA GOLF FOUNDATION
Billing Address: 4400 NW 87TH AVE
City: MIAMI State: Florida Zip Code: 33178
Phone Number: 305 477-4653 Fax Number: 305-477-4914

PERSONNEL

Rank / Title	Overtime Hourly Rate	Quantity	Event Hours	Total
Chief Fire Officer	\$ 75.00			\$ -
Captain	\$ 65.00			\$ -
Lieutenant	\$ 55.00	1	57	\$ 3,135.00
Fire Fighter	\$ 50.00	1	57	\$ 2,850.00
Fire Prevention Inspector	\$ 55.00			\$ -
Beach Manager	\$ 30.25			\$ -
Lifeguard 2	\$ 26.75			\$ -
Lifeguard 1	\$ 22.75			\$ -
Civilian (Overtime Rate Only) DISPATCHER	\$ 30.00			\$ -
Personnel Total				\$ 5,985.00

EQUIPMENT

Type	Hourly Rate	Quantity	Event Hours	Total
Pumper	\$ 100.00			\$ -
QRV / TRT	\$ 65.00			\$ -
Rescue Truck	\$ 50.00			\$ -
Motorcycle Unit	\$ 40.00			\$ -
Rescue Cart	\$ 35.00			\$ -
Rigid Hull Inflatable Boat (RHIB)	\$ 35.00			\$ -
Personal Watercraft (PWC)	\$ 35.00			\$ -
Bicycle Unit	\$ 35.00			\$ -
Equipment Total				\$ -

Please make checks payable to: Board of County Commissioners

Equipment Total	\$ -
Personnel Total	\$ 5,985.00
5% Administrative Fee	
Total Event Estimate	\$ 3,985.00

Please note: The Board of County Commissioners set all rates through County Administrative Order 7-33.

NOTE: The above costs are only an estimate for your event. Any permit related inspection costs (tents, stages, etc.) and/or other related firewatch and rescue standby related costs will be borne by the vendor. Required permit inspections must be completed before occupying or use. After hours or weekend inspections will be billed at a rate of \$50.00 per hour with a minimum 4-hour charge.

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Authority: - Section 1-16 of the Florida Fire Prevention Code empowers the local jurisdiction to establish and issue permits, certificates, notices and approvals, or orders pertaining to fire control and/or hazardous conditions. Requirements of permitting shall be established by the Fire Chief or his designee. Whenever, in the opinion of the designated fire official, rescue or firewatch may, be essential for the public safety in any place of assembly or due to the nature of the event, exhibition, display, contest or activity, the owner, agent or leasee shall employ one or more State Certified Firefighter, Fire Inspector, Paramedic or EMT's, as determined by section 2-56.2 of the Dade County Code. The cost of said personnel, equipment and administrative fees will be in accordance with Miami-Dade County Fire Rescue Department Administrative order 7-33, Special Events Off-Duty Fire Rescue Services. Vendors engaged in activities or functions for which such services are required and would be seen as necessary, shall comply with all rules, ordinances and laws.

Departmental Policy: - The Fire Rescue Department requires that all first time users of off regular duty services obtain an application until credit approval has been established. This application must be accompanied by **FULL PAYMENT FOR THE ESTIMATED TOTAL COST. ALL COMPENSATION DUE FOR SERVICES REQUEST WILL BE PREPAID BY MONEY ORDER, CERTIFIED CHECK, TRAVELERS CHECK OR CASHIER'S CHECKS AT THE TIME OF APPLICATION OR AS DETERMINED BY THE CHIEF FIRE OFFICIAL RESPONSIBLE FOR OFF REGULAR DUTY SERVICES. ANY COMPENSATION OVER AND ABOVE THE RATE ESTABLISHED IS STRICTLY PROHIBITED. ALL FUNDS PREPAID AND NOT OBLIGATED WILL BE REFUNDED TO THE APPLICANT.**

The estimated cost of the requested service is: \$ 5,985.00
 The applicant is restricted to the general assignment of duties to be performed and has no authority over Fire Rescue Personnel. To avoid a minimum fee for Off Regular Duty Services, the Fire Rescue Department must be notified at least 24 hours in advance of any changes or termination of required services. An administrative charge for processing has been included in the total cost. If an event lasts longer than the prescribed period of time, the vendor agrees to pay any and all additional costs. If a vendor fails to pay total cost or part thereof, within (60) days, an additional (10%) administrative fee may be added.

I HAVE READ AND UNDERSTOOD THE PROVISIONS OF THIS APPLICATION AND WILL ACT IN FULL COMPLIANCE OF THIS AGREEMENT.

Emma J. P... 10-6-05
 Authorized Agency Representative

October 6, 2006
 Date

Signature of the Firewatch Clerk

October 6, 2006
 Date

For further information and assistance, please contact the Special Events Bureau at (786) 331-5000 or Fax (786) 331-4435. Address 9300 NW 41st Street, Miami, FL 33178

(For Fire Department Use Only)

Final Cost: \$ _____

Signature: _____
 Chief Levi Thomas or Designee
 Special Services Division
 Special Events Bureau

 Date

Memorandum



Date: February 21, 2006

To: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

From: George M. Burgess
County Manager 

Subject: In-Kind Reserve Request Recommendation

The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The countywide in-kind reserve balance allows for the funding of this request.

Background

A retroactive waiver for in-kind services is being requested by a not-for-profit organization South Florida Golf Foundation, Inc. for their annual Miccosukee Championship Nationwide Golf Tour event held on October 17-23, 2005.

In-kind services have been requested in the amount of \$2,146.50 from the Miami-Dade Police Department for police services and \$5,985 from the Miami-Dade Fire Rescue Department for emergency services. The in-kind services provided by the Miami-Dade Fire Rescue Department will not be reimbursed by the in-kind reserve. The countywide in-kind reserve will fund \$2,146.50 for police services.

In FY 2005-06 the South Florida Golf Foundation has not received any County funding.

inkind01206