



MEMORANDUM

Agenda Item No. 11(A)(17)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: November 17, 2009

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Resolution retroactively authorizing
in-kind services for the July 4, 2009
annual "Independence Day on the
Bay Celebration"

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsors Commissioner Barbara J. Jordan, Commissioner Audrey M. Edmonson, Commissioner Sally A. Heyman and Commissioner Dorrin D. Rolle.

A handwritten signature in black ink, appearing to read "RAC", is written over a horizontal line.

R. A. Cuevas, Jr.
County Attorney

RAC/cp



MEMORANDUM

(Revised)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: November 17, 2009

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Agenda Item No. 11(A) (17)

Please note any items checked.

- ☐ "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
- ☐ Ordinance creating a new board requires detailed County Manager's report for public hearing
- ☐ No committee review
- ☐ Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous ____) to approve
- ☒ Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(17)
11-17-09

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE FIRE RESCUE DEPARTMENT FOR THE JULY 4, 2009 ANNUAL "INDEPENDENCE DAY ON THE BAY CELEBRATION" SPONSORED BY THE CITY OF NORTH MIAMI IN AN AMOUNT NOT TO EXCEED \$1,006.00 TO BE FUNDED FROM THE NON-AD VALOREM PORTION OF THE FIRE RESCUE DISTRICT BUDGET

WHEREAS, the City of North Miami has requested in-kind services from the Miami-Dade Fire Rescue Department for the July 4, 2009 annual "Independence Day on the Bay Celebration" in an amount not to exceed \$1,006.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the annual "Independence Day on the Bay Celebration" is to give the community an opportunity to celebrate America's Independence Day and to enjoy fireworks in a safe and controlled environment; and

WHEREAS, the "Independence Day on the Bay Celebration" is a special event, as defined in the attached Fee Waiver/In-kind Service Application, and \$1,006.00 of the in-kind services shall be funded from the non-ad valorem portion of the Fire Rescue District In-kind Reserve Fund,

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 Fire Rescue Department for the July 4, 2009 annual "Independence Day on the Bay Celebration" in an amount not to exceed \$1,006.00 to be funded from the non-ad valorem portion of the Fire Rescue District In-kind Reserve Fund.

The Prime Sponsors of the foregoing resolution are Commissioner Barbara J. Jordan, Commissioner Audrey M. Edmonson, Commissioner Sally A. Heyman and Commissioner Dorrin D. Rolle. It 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:

Dennis C. Moss, Chairman	
Jose "Pepe" Diaz, Vice-Chairman	
Bruno A. Barreiro	Audrey M. Edmonson
Carlos A. Gimenez	Sally A. Heyman
Joe A. Martinez	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 17th day of November, 2009. 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

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

GKS

Gerald K. Sanchez

Fax from : 3058928639
Fax sent by :

06-24-09 14:16 Pg: 2
06-24-09 12:49 Pg: 1/2

Fax from : 3058928639

06-18-09 13:25 Pg: 2

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: city of North Miami

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

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

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): Andres A. Ramos
810 NE 125 St N.M. FL 33181 305-8959840 ext.12227
Fax: 305-892-8639 , aramos@northmiami.fl.gov

4. Specify fee waiver or in-kind service requested (quantity, if applicable): See attached quote sheet requesting service for July 4th, 2009 event in North Miami (Free)

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):
see attached flyer

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☐ Youth/Education: Event benefits youth or 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)): 3000 NE 151 street N. Miami FL, Florida
International university, Koyens Conference Center

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Fax from : 3058928639
Fax sent by :

06-24-09 14:16 Pg: 3
06-24-09 12:50 Pg: 2/2


Fax from : 3058928639

06-18-09 13:25 Pg: 3

MIAMI-DADE COUNTY
FEE WAIVER/KIND SERVICES APPLICATION

8. Description of regional or local impact: Average of 4,000-5,000 people. Ages 0-99 municipality North miami -As well as the partnership with Florida International University
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): Event begins at 6pm and ends at Approximately 10pm
10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): See Attacheden above area will be available for first aid and administering
11. Expected number of participants and estimated attendance (per day, if applicable): 4,000-5,000
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): see attached

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


Signature of Authorized Representative

6/24/09
Date

City of North Miami invites you to the

Independence Day on the Bay

Free
Admission

Saturday, July 4th
Gates open at 6 p.m.

Fireworks at sundown

Bring your family to enjoy children's games, live entertainment and a spectacular fireworks show!

MIAMI
PARKS & RECREATION

REGISTER NOW

Summer Camps
June 8 - August 21, 2009

Join us for a fun-filled summer at one of our day camps:
Everglades Forest, Camp Discovery, WP Sports Camp, G.O.L.D. Camp, Little Camp and more!

AGES VARY

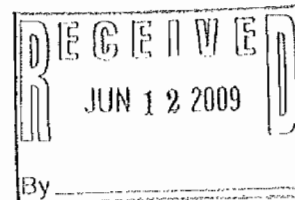
Florida International University
Biscayne Bay Campus
Overlooking Biscayne Bay
3002 NE 151 Street
Miami, FL 33137
Visit all of our Web sites:
northmiami.gov/parks

For more information, call 305-895-9840 or call our Event Information Line at 305-895-4636





It Starts In Parks!



May 26, 2009

Commissioner Audrey Edmonson
Miami Dade County District 3
Stephen P. Clark Center
111 NW 1st Street, Suite 220
Miami, FL 33128-1963

Dear Commissioner Edmonson,

The City of North Miami would like to thank you for your dedication and commitment to serve the needs of the Miami-Dade Community.

This year our traditional 4th of July Event will be held at the Kovens Conference Center grounds on the Florida International University Biscayne Bay Campus, 3000 NE 151 St., Biscayne Bay, North Miami, FL. The gates will open at 6 pm for the games and entertainment, followed by fireworks after sundown. The 2009 "Independence Day by the Bay" on July 4th is a free community event open to the public and for the entire family to enjoy.

The City of North Miami is requesting your assistance to cover the cost or to waive the service fees of Miami-Dade County Fire Rescue. Your collaborative support will certainly make a difference in our great community.

Thank you in advance for your continued community support and your anticipated commitment to this request. My office will contact your chief of staff to follow up on the details of your generous contribution.

Sincerely,


Clarence Patterson
City Manager

Cc: Terry Lytle
Parks and Recreation Director



JULY 4TH EXPENSE REPORT

001-12478004-574-391

7/4/2008 (Saturday)

Pg: 6

W 11-11-13:26

Item	Description	Cost	Req# / P/O#
All Events Rental	Table, chairs, Porta Potties		
Blanchard Machinery	5 light towers	225.00	
Costco	Entertainer Refreshments		
FCF	Popcorn bags, Snocone pumps	171.25	
Fire Rescue	Commissioner's Donated		
Fire expenses	Officers	3,359.00	
Good-Bag	Amusement		
Kwik Covers	Tablecloths - fixed	77.50	
Northern Tools	10 Tents (@ 69.99)		
RoadSafe Baricades (NIES)	Baricades	465.00	
SEAL - Stage Equip. & Lighting	Stage Equip. & Lighting		
Stans Music (Sound)	New 16 ch mixer - Parks		
Tanenbaum Insurance	Fireworks	16,500.00	
Zambelli			
	TOTAL Expenses	20,897.75	
			Misc supplies
			Tent permit

\$25,026.50 estimated total for 2003
-1,776.50 negative

Staff Budget	Total donations
Recreation \$1060.00	4th Budgeted 23,250.00
Parks Staff \$4590.00	Budget w/ Donations 23,450.00
Police Staff \$3040.00	Expenses 20,897.75
Public Works \$560.00	Remaining Balance 2,552.25

Fax from : 385.0020639

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 lessee 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: \$ 805.55

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.


Authorized Agency Representative

June 5, 2009

Date

Signature of the Firewatch Clerk

June 5, 2009

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 Manny Menua or Designee
Fire Prevention Division
Special Events Bureau

Date

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

9300 N.W. 41 STREET

DORAL, FLORIDA 33178

OFFICE (786) 331-5000 / FAX (786) 331-4435

Invoice Number: _____

Date: June 5, 2009

Control Number: _____

Prepared By: LONIE BROWN

VENDOR INFORMATION

Name: <u>CITY OF NORTH MIAMI</u>			
Billing Address: <u>810 NE 125TH STREET</u>			
City: <u>NORTH MIAMI</u>	State: <u>FL</u>	Zip Code: <u>33161</u>	
Phone Number: <u>305-929-9773</u>	Fax Number: <u>305-857-0027</u>		

PERSONNEL

Chief Fire Officer	\$ 54.80			\$ -
Captain	\$ 49.58	1	4	\$ 198.32
Lieutenant	\$ 44.36			\$ -
Fire Fighter	\$ 41.75	2	4	\$ 334.00
Civilian Inspector	\$ 55.32			\$ -
Beach Manager	\$ 30.25			\$ -
Lifeguard 2	\$ 26.75			\$ -
Lifeguard 1	\$ 22.75			\$ -
Civilian (Overtime Rate Only)	\$ 30.00			\$ -
DISPATCHER				
Personnel Total				\$ 532.32

EQUIPMENT

Pumper	\$ 100.00			\$ -
QRV / TRT	\$ 65.00			\$ -
Rescue Truck	\$ 50.00	1	4	\$ 200.00
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				\$ 200.00
Personnel Total				\$ 532.32
10% Administrative Fee				\$ 73.23
Total Event Estimate				\$ 805.55

Please make checks payable to: Board of County Commissioners

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

Event Information

Date of Request: 6/5/2009 Application: _____
Name of Organization: CITY OF NORTH MIAMI
Address: 810 NE 125TH STREET NORTH MIAMI FL 33161
City State Zip Code
Phone: (305) 895-9840 Fax: (305) 892-8639
Type of Event: FIREWORKS Estimated Attendance: _____
Site Address: FLORIDA INTERNATIONAL UNIVERSITY
Site Contact Person: ERNEST BAPTIST Phone: (786) 267-0942
Date of Service: From: 7/4/2009 To: 7/4/2009
Hours of Operation: From: 6 PM To: 10 PM

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)

- | | |
|---|---|
| <input type="checkbox"/> Firewatch | <input type="checkbox"/> Rescue Stand-By |
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Movie Shoot |
| <input type="checkbox"/> Code Requirements | <input type="checkbox"/> Concert |
| <input type="checkbox"/> Fair / Festival | <input type="checkbox"/> Sporting Event |
| <input type="checkbox"/> Use of Flammable | <input type="checkbox"/> Meeting |
| <input type="checkbox"/> Cooking Tents | <input type="checkbox"/> Display |
| <input type="checkbox"/> Fireworks, Explosive | <input type="checkbox"/> Other (Specify): _____ |

See Reverse Side For Additional Important Information

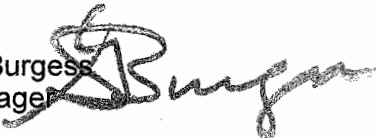
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Memorandum



Date: November 17, 2009

To: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

From: George M. Burgess
County Manager 

Subject: Fire District In-Kind Reserve Request Recommendation

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

Background

A retroactive waiver for in-kind services has been requested by the City of North Miami, for their "Annual July 4th Independence Day Celebration" event held on July 4, 2009.

In-kind services have been requested in an amount not to exceed \$1,006 from the Miami-Dade Fire Rescue Department for personnel services. This event will be funded from the non-ad valorem in-kind reserve of the fire rescue district budget.

In FY 2008-09, the City of North Miami received \$2,566 from District 4 in-kind reserve.

Inkind14909