

MEMORANDUM

Agenda Item No. 3(A)(4)

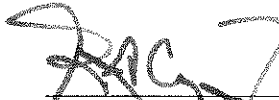
TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: March 4, 2014

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

SUBJECT: Resolution retroactively
authorizing in-kind services for
the December 14, 2013
“Tree Lighting Festival” event

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Dennis C. Moss.



R. A. Cuevas, Jr.
County Attorney

RAC/cp



MEMORANDUM
(Revised)

TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: March 4, 2014

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

SUBJECT: Agenda Item No. 3(A)(4)

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 Mayor'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

Agenda Item No. 3(A)(4)

Veto _____

3-4-14

Override _____

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE DECEMBER 14, 2013 "TREE LIGHTING FESTIVAL" SPONSORED BY RICHMOND HEIGHTS COMMUNITY ASSOCIATION, INC. IN AN AMOUNT NOT TO EXCEED \$790.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 9 FY 2013-14 IN-KIND RESERVE FUND

WHEREAS, Richmond Heights Community Association, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the December 14, 2013 "Tree Lighting Festival" in an amount not to exceed \$790.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, this free event is a cultural program designed to promote unity and showcase local talent; and

WHEREAS, Richmond Heights Community Association, Inc. is a not-for-profit organization; and

WHEREAS, the "Tree Lighting Festival" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$790.00 of the in-kind services shall be funded from the balance of the District 9 FY 2013-14 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 Parks, Recreation and Open Spaces Department for the December 14, 2013 "Tree Lighting Festival" event sponsored by Richmond Heights Community Association, Inc. in an amount not to exceed \$790.00 to be funded from the balance of the District 9 FY 2013-14 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Dennis C. Moss. 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:

Rebeca Sosa, Chairwoman
Lynda Bell, Vice Chair

Bruno A. Barreiro
Jose "Pepe" Diaz
Sally A. Heyman
Jean Monestime
Sen. Javier D. Souto
Juan C. Zapata

Esteban L. Bovo, Jr.
Audrey M. Edmonson
Barbara J. Jordan
Dennis C. Moss
Xavier L. Suarez

The Chairperson thereupon declared the resolution duly passed and adopted this 4th day of March, 2014. 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

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
FY 2008-09

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:

Office of Strategic Business Management
111 N.W. 1st Street, Suite 2200
Miami, FL 33128

Phone: (305) 375-5143
Fax: (305) 376-5168

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.)

****Note: Event budget must be included for "Special" and "Major" event types.****

Commissioner sponsoring event Commissioner Dennis C. Moss

1. Full legal name of the requesting organization: Richmond Heights Homeowners Association, Inc.

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

- Not-For-Profit or Tax Exempt
- For-Profit
- Local Government or Public Entity
- Other (specify): _____

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.):

Barbara L. Nickerson

Phone & Fax # (305)238-0465

14201 Polk Street

E-mail (bnicker1@bellsouth.net)

Miami, Florida 33176

4. Specify fee waiver or in-kind service requested (quantify, if applicable): Requesting the (24 by 40) flat stage for the annual Tree Lighting Festival.

MIAMI-DADE COUNTY
FEE WAIVER/KIND SERVICES APPLICATION
Page 2

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): The annual Tree Lighting Festival is scheduled for December 14, 2013 from 5:00 to 10:00 pm. It is a cultural arts program designed to promote unity and showcase the talent in our community. It is a free activity for the residents of Richmond Heights and surrounding communities have enjoyed for 29 years.

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)): The event will be held at Sgt. Joe Delancy's Park. Located at 14450 Boggs Drive in Richmond Heights. The park is located in District 09.
(see attachments 1A & B)

8. Description of regional or local impact: The community Tree Lighting Festival has a has a postive influrence on Richmond Heights ans other South-Miami Dade Community Communities.

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): Set-up began at 11:00 am. Breakdown starts at 9:30 pm. The performing art start at 6:00 pm and Santa lands at 8:30 pm. The Music that draws the crowd began at 5:00 pm. (see attachment #2)

MAMI-DADE COUNTY
FEE WAIVER/KIND SERVICES APPLICATION
Page 3

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): See Attachment #3

11. Expected number of participants and estimated attendance (per day, if applicable): _____

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): Attachment #4 is a copy of the project budget from this years cultural arts grant.

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

Barbara L. Nickerson
Signature of Authorized Representative

November 6, 2013
Date



**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Richmond Heights Christmas Tree Lighting

EQUIPMENT REQUESTED: Stage 20' X 40'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: District 9

OR INDEX CODE (MIAMI-DADE COUNTY AGENCIES ONLY): _____

BILLING ADDRESS/ ZIP CODE: 1634 Nw 6th Ave 1634 NW 6th Ave

NAME/TITLE OF THE EVENT: Richmond Heights Christmas Tree Lighting Ceremony

ADDRESS OF EVENT: 14450 Boggs Drive

TODAY'S DATE: 11/21/13 DATE (S) & TIME OF EVENT: 5pm - 10pm

SET-UP TIME & DAY: 2pm 12/14/13

TAKE-DOWN & DAY: 11pm 12/14/13

CONTACT PERSON/PHONE: Diana Perez 305-375-4832 f

AT SITE CONTACT/CELL PHONE #: _____

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.

OTHER INFORMATION: Include additional equipment if needed.

We, the users, understand that we assume full responsibility for any damage, theft, or loss to said equipment and its accessories between the time the Miami-Dade Park and Recreation Department completes setting up and the time it takes down. We, the users, also agree to adhere to the requests set forth in the rental policy. We do have a copy of the rental policy and fully understand the requirements set forth in renting the equipment requested as out-lined in the rental policy. **We also understand that the total fee is to be remitted (15) fifteen working days before the event.**

*Fee 790.00

Signature [Signature] 11/22/13

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Agency/Group: _____

CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED

½ (HALF) OF RENTAL FEE. *There will be no completed reservation on the schedule unless the confirmation Form is filled out completely and signed.

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



Detail by FEI/EIN Number

Florida Non Profit Corporation

RICHMOND HEIGHTS COMMUNITY ASSOCIATION, INC.

Filing Information

Document Number	N07784
FEI/EIN Number	592502219
Date Filed	02/21/1985
State	FL
Status	ACTIVE
Last Event	AMENDED AND RESTATEDARTICLES/NAME CHANGE
Event Date Filed	08/08/2013
Event Effective Date	NONE

Principal Address

11225 SW 152ND STREET
MIAMI, FL 33157

Changed: 01/24/2012

Mailing Address

11225 SW 152ND STREET
MIAMI, FL 33157

Changed: 01/24/2012

Registered Agent Name & Address

MARSHALL, JAMES
13900 HARRISON STREET
MIAMI, FL 33176

Officer/Director Detail

Name & Address

Title P

MARSHALL, JAMES L
13900 HARRISON STREET
MIAMI, FL 33176

Title VP

Nickerson, Barbara

14021 Harrison Street
Miami, FL 33176

Title S

COCHRAN, CYNTHIA
14836 CARVER DRIVE
MIAMI, FL 33176

Title Treasurer

MACKINS, ALMIRITA
14120 HARRISON STREET
MIAMI, FL 33176

Title Other, Chaplian

ROBERSON, NED
14641 SW 106 AVE.
MIAMI, FL 33176

Annual Reports

Report Year	Filed Date
2011	02/01/2011
2012	01/24/2012
2013	01/22/2013

Document Images

08/08/2013 -- Amended/Restated Article/NC	View image in PDF format
01/22/2013 -- ANNUAL REPORT	View image in PDF format
01/24/2012 -- ANNUAL REPORT	View image in PDF format
02/01/2011 -- ANNUAL REPORT	View image in PDF format
01/15/2010 -- ANNUAL REPORT	View image in PDF format
02/12/2009 -- ANNUAL REPORT	View image in PDF format
01/04/2008 -- ANNUAL REPORT	View image in PDF format
02/13/2007 -- ANNUAL REPORT	View image in PDF format
02/21/2006 -- ANNUAL REPORT	View image in PDF format
03/08/2005 -- ANNUAL REPORT	View image in PDF format
02/02/2004 -- ANNUAL REPORT	View image in PDF format
01/17/2003 -- ANNUAL REPORT	View image in PDF format
02/18/2002 -- ANNUAL REPORT	View image in PDF format
07/31/2001 -- ANNUAL REPORT	View image in PDF format
01/19/2000 -- ANNUAL REPORT	View image in PDF format
03/16/1999 -- ANNUAL REPORT	View image in PDF format
01/27/1998 -- ANNUAL REPORT	View image in PDF format
01/22/1997 -- ANNUAL REPORT	View image in PDF format

[03/04/1996 -- ANNUAL REPORT](#)

[View image in PDF format](#)

[02/22/1995 -- ANNUAL REPORT](#)

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State of Florida, Department of State

Form **W-9**
[Rev. August 2013]
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Name (as shown on your income tax return)
Richmond Heights Homeowners Association, INC.

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:
 Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Other (see instructions) ▶ _____

Exemptions (see instructions):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____

Address number, street, and apt. or suite no.
11226 S.W. 152nd Street

City, state, and ZIP code
Miami, Florida 33176

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-					

Employer identification number									
6	9	-	2	5	0	2	2	1	9

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ *Barbara L. Nickerson* Date ▶ December 6, 2013

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

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Notes

mapquest

ATTACHMENT 1A

Trip to:
14450 Boggs Dr
Miami, FL 33176-7307
1.33 miles / 3 minutes

11225 SW 152nd St, Miami, FL 33157-1101



- 1. Start out going west on SW 152nd St / Coral Reef Dr / SR-992 W toward SW 113th Ave. **0.2 Mi**
- 2. Take the Florida's Turnpike North ramp toward Orlando. **0.05 Mi**
- 3. Turn slight right onto Florida's Turnpike N. **0.3 Mi**
- 4. Turn slight right onto SW 117th Ave. **0.3 Mi**
- 5. Turn right onto Lincoln Blvd. **0.2 Mi**
- 6. Turn left onto Madison St. **0.10 Mi**
- 7. Turn right onto Pinkston Dr. **0.05 Mi**
- 8. Turn right onto Monroe St. **0.2 Mi**
- 9. Take the 1st left onto Boggs Dr. **0.01 Mi**
- 10. **14450 BOGGS DR** is on the left.

14450 Boggs Dr, Miami, FL 33176-7307

ATTACHMENT
B

mapquest

Map of
14450 Boggs Dr
Miami, FL 33176-7307

Notes



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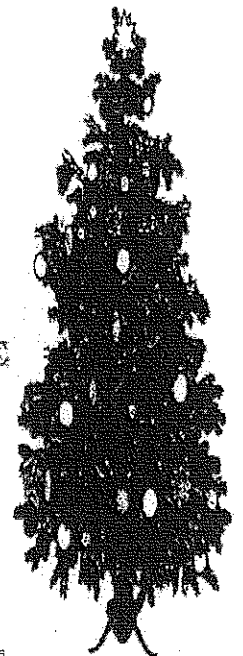
ATTACHMENT #2

THE RICHMOND HEIGHTS HOMEOWNER'S ASSOCIATION, INC. PRESENTS

In partnership with
Miami-Dade County Parks and Recreation Department
The Miami-Dade County Department of Cultural Affairs
Miami-Dade Kendall Police Department

THE ANNUAL HOLIDAY TREE LIGHTING FESTIVAL

SEE SANTA ARRIVE BY HELICOPTER
ENJOY A CULTURAL ARTS PROGRAM
GIFTS FOR CHILDREN 1 TO 12 YEARS OF AGE
GIFTS FOR SENIOR CITIZENS



DATE: SATURDAY, DECEMBER 14, 2012
PLACE: SGT. JOE DELANCY'S PARK
14450 BOGGS DR. - RICHMOND HEIGHTS
TIME: 5:00 P.M. - 10:00 P.M.

COME ENJOY THIS FAMILY AFFAIRE
FEATURING
LOCAL DANCERS & CHOIRS
PROFESSIONAL PERFORMING ARTIST
SINGERS & POETS


"With the support of the Miami-Dade County Department of Cultural Affairs and the Cultural Affairs Council, The Miami-Dade County Mayor, and the County Commissioners"

Memorandum



Date: March 4, 2014

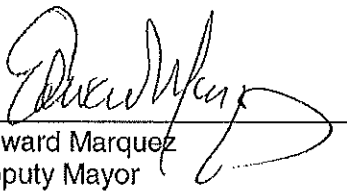
To: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor 

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by Richmond Heights Community Association, Inc. for their "Tree Lighting Festival" event held on December 14th, 2013.

In-kind services have been requested in an amount not to exceed \$790.00 from the Parks, Recreation and Open Spaces Department for the use of a 20 x 40 stage. This event will be funded from the balance of District 9 FY 2013-14 In-Kind Reserve Fund.


Edward Marquez
Deputy Mayor

Inkind01416