

# MEMORANDUM

Agenda Item No. 3(A)(4)

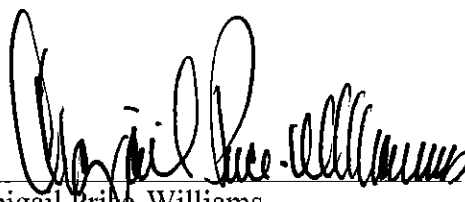
**TO:** Honorable Chairman Esteban L. Bovo, Jr.  
and Members, Board of County Commissioners

**DATE:** April 10, 2018

**FROM:** Abigail Price-Williams  
County Attorney

**SUBJECT:** Resolution retroactively authorizing in-kind services from the Parks, Recreation and Open Spaces Department in the amount of \$432.50, and from the Department of Solid Waste Management in the amount of \$537.54 for a total amount of \$970.04 to be funded from the balance of the District 11 FY 2017-18 In-Kind Reserve Fund for the November 4, 2017 "Commissioner Joe A. Martinez Farm Share Food Distribution Event" sponsored by Commissioner Joe A. Martinez

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Joe A. Martinez.



Abigail Price-Williams  
County Attorney

APW/smm

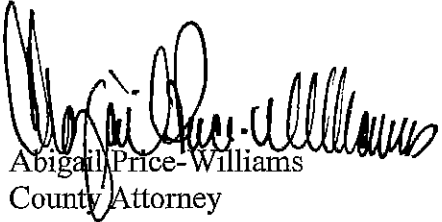


# MEMORANDUM

(Revised)

**TO:** Honorable Chairman Esteban L. Bovo, Jr.  
and Members, Board of County Commissioners

**DATE:** April 10, 2018

**FROM:**   
Abigail Price-Williams  
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
- ☐ Statement of social equity 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  
Veto \_\_\_\_\_  
Override \_\_\_\_\_

Agenda Item No. 3(A)(4)  
4-10-18

RESOLUTION NO. \_\_\_\_\_

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT IN THE AMOUNT OF \$432.50, AND FROM THE DEPARTMENT OF SOLID WASTE MANAGEMENT IN THE AMOUNT OF \$537.54 FOR A TOTAL AMOUNT OF \$970.04 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 11 FY 2017-18 IN-KIND RESERVE FUND FOR THE NOVEMBER 4, 2017 "COMMISSIONER JOE A. MARTINEZ FARM SHARE FOOD DISTRIBUTION EVENT" SPONSORED BY COMMISSIONER JOE A. MARTINEZ

**WHEREAS**, Commissioner Joe A. Martinez has requested in-kind services from the Parks, Recreation and Open Spaces Department and the Department of Solid Waste Management for the November 4, 2017 "Commissioner Joe A. Martinez Farm Share Food Distribution Event" in an amount of \$970.04 (see attached Fee Waiver/In-kind Service Application); and

**WHEREAS**, the "Commissioner Joe A. Martinez Farm Share Food Distribution Event" distributes food to residents in need and provides information regarding county services; and

**WHEREAS**, the "Commissioner Joe A. Martinez Farm Share Food Distribution Event" is a district event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$970.04 of the in-kind services shall be funded from the balance of the District 11 FY 2017-18 In-Kind Reserve funds,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA**, that this Board retroactively authorizes in-kind services in the amount of \$432.50 from the Parks, Recreation and Open Spaces Department, and \$537.54 from the Department of Solid Waste Management for a total amount of

\$970.04 to be funded from the balance of the District 11 FY 2017-18 In-Kind Reserve Fund for the November 4, 2017 "Commissioner Joe A. Martinez Farm Share Food Distribution Event" sponsored by Commissioner Joe A. Martinez.

The Prime Sponsor of the foregoing resolution is Commissioner Joe A. Martinez. 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:

Esteban L. Bovo, Jr., Chairman	
Audrey M. Edmonson, Vice Chairwoman	
Bruno A. Barreiro	Daniella Levine Cava
Jose "Pepe" Diaz	Sally A. Heyman
Barbara J. Jordan	Joe A. Martinez
Jean Monestime	Dennis C. Moss
Rebeca Sosa	Sen. Javier D. Souto
Xavier L. Suarez	

The Chairperson thereupon declared the resolution duly passed and adopted this 10<sup>th</sup> day of April, 2018. This resolution shall become effective upon the earlier of (1) 10 days after the date of its adoption unless vetoed by the County Mayor, and if vetoed, shall become effective only upon an override by this Board, or (2) approval by the County Mayor of this Resolution and the filing of this approval with the Clerk of the 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**

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 Management and Budget  
111 N.W. 1<sup>st</sup> Street, Suite 2200  
Miami, FL 33128

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

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

Joe A. Martinez

1. Full legal name of the requesting organization:

Commissioner Joe A. Martinez

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.):

Roni Oves 4081 SW 152 Ave, Unit 21, Miami, FL 33185  
Ph: 305-552-1155, Fax 305-552-0577  
Email: District11@MiamiDade.gov

4. Specify fee waiver or in-kind service requested (quantify, if applicable):

A total of 10 port-a-johns  
(4 ADA and 6 Regular) Total \$432.50.  
= The ADA are \$65.00 each and \$28.75 each for  
the Regular units.

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): Farm Share  
November 4<sup>th</sup> 2017, Food Distribution for residents  
in need. Information Regarding County Services  
for Residents

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)): Tamiami Lakes Park  
13220 SW 18 St, Miami FL 33175

8. Description of regional or local impact: \_\_\_\_\_

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

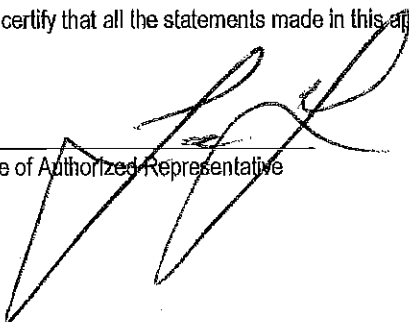
\_\_\_\_\_

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): \_\_\_\_\_

\_\_\_\_\_

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

Signature of Authorized Representative



Date

10-23-17



**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:

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

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

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.)
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- ☐ 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 Joe A. Martinez

1. Full legal name of the requesting organization: Commissioner Joe A. Martinez

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.):

Roni Oves 4081 SW 152 Ave, Unit 21, Miami, Fla 33185  
Ph: 305-552-1155, Fax 305-552-0577  
Email: District 11 @ Miami Dade.gov

4. Specify fee waiver or in-kind service requested (quantify, if applicable): 1-20 cubic yard Container,

1- Disposal 1 Ton Waste Container Total \$537.54 *JP*

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): Farm Share  
November 4<sup>th</sup> 2017 Food Distribution for residents  
in Need. Information Regarding County Services for  
Our Residents

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

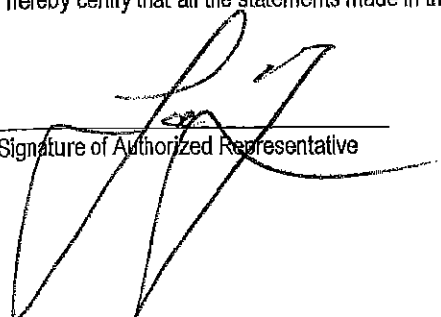
7. Physical address of event venues (please specify Commission District(s)): Tamiami Lakes Park,  
13220 SW 18 St. Miami, Fla 33175

8. Description of regional or local impact: \_\_\_\_\_

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): \_\_\_\_\_

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

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

  
\_\_\_\_\_  
Signature of Authorized Representative

10-23-17  
\_\_\_\_\_  
Date



**SHOWMOBILES, STAGES, BLEACHERS,  
AND SOUND PRODUCTION**  
**(305) 226-8315 Ext. 4/(305) 553-8511 (Fax)**

**EQUIPMENT (S) CONFIRMATION FORM**

**ORGANIZATION/AGENCY:** Office of Commissioner Joe A. Martinez

**EQUIPMENT REQUESTED:** Portable Restroom (4) ADA Units and (6) Single Units

**NAME OF PERSON RESPONSIBLE FOR THIS BILL:** Commissioner Joe A. Martinez

**OR INDEX CODE (MIAMI-DADE AGENCIES ONLY):** \_\_\_\_\_

**BILLING ADDRESS/ZIP CODE:** 4081 SW 152 Avenue, Unit 21

**NAME/TITLE OF THE EVENT:** Farm Share (Food Distribution)

**ADDRESS OF EVENT:** Tamiami Lakes Park 13220 SW 18 Street

**TODAY'S DATE:** 10/23/17

**DATE (S) & TIME OF EVENT:** 11/04/17 9AM - 1PM

**SET-UP TIME & DAY:** 11/03/17 11AM

**TAKE-DOWN & DAY:** 11/06/17 11AM

**CONTACT PERSON/PHONE:** Carmen Betancourt 305-552-1155

**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: \$432.50 In-kind District #11**

**\*(SEE FEE SCHEDULE FOR EXACT CHARGES)**

**Signature:**

**Agency/Group:**

Commissioner Joe A. Martinez  
Commissioner District #11

**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.**

**Late equipment arrivals, please call (786) 236-7926**

**Special Collection Date: Saturday, November 4, 2017**

District 11 - Commissioner Joe A. Martinez Farm Share Event  
Event Location: Tamiami Lakes Park - 13220 SW 18 Street  
Time: 9:00 AM - 1:00 PM

**Collection Operations - Trash Division**

Invoice Number: I - 0074

Classification:	Activity	Location	Number of Positions	Rate	Hrs/Day	Days/Week	Salaries	Fringes	Amount
Drop-Off on Sat, 11/04/17 at 8:00 a.m.		Pick-up on Sat, 11/04/17 at 1:00 p.m.							
Trash Truck Driver	Collection/Delivery/Transport/Disposal Services of Containers Contents	See Above	1	\$24.69	4	1	\$98.36	\$40.04	\$138.40
Total Labor							\$98.36	\$40.04	\$138.40

Containers & Disposal Fees	Unit	Pounds	Rate	Trucks/Tons	Days	Amount
20-CubicYard Container	1		\$330.00		See Above	\$330.00
Disposal/Ton @ \$61.01			\$61.01	0.93		\$56.74
Transfer Fee			\$13.33	0.93		\$12.40
Total Fees						\$399.14

Summary	
Description	Amount
Salaries & Fringes	\$138.40
Containers Fee	\$330.00
Disposal Fee	\$69.14
Total	\$537.54

Carmen Betancourt 305-375-5511 / Roniel Oves 786-828-8014 (cell)

Name of person requesting (please print)

In-Kind

Index Code Required

D-11

Department/  
District No.

11/21/2017

Date

# Memorandum



**Date:** April 10, 2018

**To:** Honorable Chairman Esteban L. Bovo, Jr.  
and Members, Board of County Commissioners

**From:** Carlos A. Gimenez  
Mayor

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

**Subject:** District Specific In-Kind Request

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A retroactive waiver for in-kind services has been requested by Commissioner Joe A. Martinez for the "Commissioner Joe A. Martinez Farm Share Food Distribution Event" held on November 4, 2017.

In-kind services have been requested in amount not to exceed \$432.50 from the Parks, Recreation and Open Spaces Department contributing towards the use of six single unit portable restrooms and four ADA compliant portable restrooms; and an amount not to exceed \$537.54 from the Department of Solid Waste Management towards the utilization of one 20-cubic yard container and a one ton waste container. This event will be funded from the balance of District 11 FY 2017-18 In-Kind Reserve Fund.

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

Edward Marquez  
Deputy Mayor

Inkind01741