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CLERK OF THE BOARD
OF COUNTY COMMISSIONERS
MIAMI-DADE COUNTY, FLORIDA

MEMORANDUM Agenda Item No. 11(A)(36)

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

DATE: June 30, 2009

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

SUBJECT: Resolution retroactively authorizing in-kind services for the May 10, 2009 "Celebration of Israel's Independence Day" event

Resolution No. R-885-09

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

R. A. Cuevas, Jr.
County Attorney

RAC/cp

RESO\2078

MEMORANDUM
(Revised)

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

DATE: June 30, 2009

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

SUBJECT: Agenda Item No. 11(A)(36)

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 Mayor'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
Veto _____
Override _____

Agenda Item No. 11(A)(36)
6-30-09

RESOLUTION NO. **R-885-09**

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT AND THE MIAMI-DADE POLICE DEPARTMENT FOR THE MAY 10, 2009 "CELEBRATION OF ISRAEL'S INDEPENDENCE DAY" SPONSORED BY THE CONSULATE GENERAL OF ISRAEL IN AN AMOUNT NOT TO EXCEED $8,305.00 TO BE FUNDED FROM THE DISTRICT 4 IN-KIND RESERVE FUND

WHEREAS, the Consulate General of Israel has requested in-kind services from the Miami-Dade Park and Recreation Department and the Miami-Dade Police Department for the May 10, 2009 "Celebration of Israel's Independence Day" in an amount not to exceed $8,305.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Celebration of Israel's Independence Day" will allow the community to join together in celebration of Israel's 61st anniversary; and

WHEREAS, the "Celebration of Israel's Independence Day" is a district event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and $8,305.00 of the in-kind services shall be funded from the District 4 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 Park and Recreation Department and the Miami-Dade Police Department for the May 10, 2009 "Celebration of Israel's Independence Day" in an amount not to exceed $8,305.00 to be funded from the District 4 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Sally A. Heyman and the Co-Sponsor is Commissioner Joe A. Martinez. It was offered by Commissioner **Jose "Pepe" Diaz** who moved its adoption. The motion was seconded by Commissioner **Rebeca Sosa** and upon being put to a vote, the vote was as follows:

Dennis C. Moss, Chairman **aye**
Jose "Pepe" Diaz, Vice-Chairman **aye**

Bruno A. Barreiro	**absent**	Audrey M. Edmonson	**aye**
Carlos A. Gimenez	**aye**	Sally A. Heyman	**aye**
Joe A. Martinez	**absent**	Barbara J. Jordan	**aye**
Dorrin D. Rolle	**aye**	Natacha Seijas	**aye**
Katy Sorenson	**aye**	Rebeca Sosa	**aye**
Sen. Javier D. Souto	**absent**		

The Chairperson thereupon declared the resolution duly passed and adopted this 30th day of June 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: **DIANE COLLINS**
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) 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 Commissioner Sally A. Heyman

1. Full legal name of the requesting organization: Consulate General of Israel

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.):

   Eliyahu Yifrach, Consul — office: 305.925-9401
   100 N. Biscayne Blvd., Suite 1800 — cell: 305.951-9080
   Miami, FL 33132

4. Specify fee waiver or in-kind service requested (quantify, if applicable): Parks
   Police ~~and Fire~~, as required for safety of event

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FEE WAIVER/IN-KIND SERVICES APPLICATION
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5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):

Israel's Independence Day community picnic and festival. Families and the community to join together for a day of celebration of Israel's 61 Anniversary. Will include music and dancing and a day of events.

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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)): District 4

Haulover Park - 10800 Collins Avenue, Miami, FL 33167

8. Description of regional or local impact:

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

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FEE WAIVER/IN-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): _____

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.

ELIYAHU YIFRACH- אליהו יפרח
CONSUL קונסול

Signature of Authorized Representative

3/24/09
Date

MIAMI-DADE FIRE RESCUE DEPARTMENT
SPECIAL EVENTS BUREAU

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

SPECIAL EVENTS OVERTIME ESTIMATE SHEET

Invoice Number: _____ Date: March 26, 2009

Control Number: _____ Prepared By: LONIE BROWN

VENDOR INFORMATION

Name: CONSULATE GENERAL OF ISRAEL(IN KIND)

Billing Address: 100 N BISCAYNE BLVD. SUITE 1800

City: MIAMI State: FL Zip Code: 33132

Phone Number: 305-925-9405 Fax Number: 305-925-9451

PERSONNEL

Rank / Title	Overtime Hourly Rate	Quantity	Event Hours	Total
Chief Fire Officer	$ 75.00			$ -
Captain	$ 65.00	1	9	$ 585.00
Lieutenant	$ 55.00			$ -
Fire Fighter	$ 50.00	2	9	$ 900.00
Civilian Inspector	$ 56.04			$ -
Beach Manager	$ 30.25			$ -
Lifeguard 2	$ 26.75			$ -
Lifeguard 1	$ 22.75			$ -
Civilian (Overtime Rate Only) DISPATCHER	$ 30.00			$ -
			Personnel Total	$ 1,485.00

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	$ -
			Personnel Total	$ 1,485.00
			10% Administrative Fee	
			Total Event Estimate	**$ 1,485.00**

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.

Rev. 08 07 08

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MIAMI-DADE PARKS

SHOWMOBILES, STAGES, BLEACHERS, AND SOUND PRODUCTION

(305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Consulate General of Israel

EQUIPMENT REQUESTED: Large Showmobile and Generator

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Sally Heyman District #4

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): CCENT010496

BILLING ADDRESS/ZIP CODE: 1100 N.E. 163rd Street #303 North Miami Beach, FL 33162

NAME/TITLE OF THE EVENT: Israel 61 Anniversary Community Festival

ADDRESS OF EVENT: Haulover Park 10800 Collins Avenue

TODAY'S DATE: 03/25/09

DATE (S) & TIME OF EVENT: 05/10/09 9:00 A.M. – 4:00 P.M.

SET-UP TIME & DAY: 05/10/09 8:00 A.M.

TAKE-DOWN TIME & DAY: 05/10/09 5:00 P.M.

CONTACT PERSON/PHONE: Eliyahu Yifrach (305) 951-9080

AT SITE CONTACT/CELL PHONE#: Same as above

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.
Set up next to sand volleyball courts

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:** **$2,866.00 In-Kind District #4**

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: Eliyahu Yifrach

Agency/Group: Consulate General of Israel

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

Memorandum

MIAMI-DADE COUNTY

Date: June 30, 2009

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

From: George M. Burgess
County Manager

Subject: District Specific In-Kind Reserve Request Recommendation

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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 district specific in-kind reserve balance allows for funding of this request.

Background

A retroactive waiver for in-kind services is being requested by the Consulate General of Israel, for their "Celebration of Israel's Independence Day" event held on May 10, 2009.

In-kind services have been requested in an amount not to exceed $2,866 from the Miami-Dade Park and Recreation Department for the use of a large show mobile and $5,439 from the Miami-Dade Police Department for a total in-kind amount of $8,305. This event will be funded from the District 4 in-kind reserve fund.

In FY 2008-09, the Consulate General of Israel has received no county funding for this event.

Inkind10209