



MEMORANDUM

Agenda Item No. 11(A)(32)

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

DATE: July 3, 2012

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

SUBJECT: Resolution retroactively authorizing
in-kind services for the April 27, 2012
"Senior Tour of Zoo Miami" event

Resolution No. R-611-12

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

DATE: July 3, 2012

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

SUBJECT: Agenda Item No. 11(A)(32)

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)(32)
7-3-12

RESOLUTION NO. R-611-12

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT AND THE COMMUNITY ACTION AND HUMAN SERVICES DEPARTMENT FOR THE APRIL 27, 2012 "SENIOR TOUR OF ZOO MIAMI" EVENT SPONSORED BY THE WEST PERRINE SENIOR CENTER AND THE RICHMOND HEIGHTS SENIOR CENTER IN AN AMOUNT NOT TO EXCEED \$895.36 TO BE FUNDED FROM THE DISTRICT 9 FY 2011-12 IN-KIND RESERVE FUND

WHEREAS, the West Perrine Senior Center and the Richmond Heights Senior Center have requested in-kind services from the Parks, Recreation and Open Spaces Department and the Community Action and Human Services Department for the April 27, 2012 "Senior Tour of Zoo Miami" in an amount not to exceed \$895.36 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "Senior Tour of Zoo Miami" is to give senior citizens the opportunity to enjoy a stimulating tour of Zoo Miami; and

WHEREAS, the West Perrine Senior Center and the Richmond Heights Senior Center are government entities; and

WHEREAS, the "Senior Tour of Zoo Miami" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Applications, and \$895.36 of the in-kind services shall be funded from the District 9 FY 2011-12 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 and the Community Action and Human Services Department for the April 27, 2012 "Senior Tour of Zoo

Miami” sponsored by the West Perrine Senior Center and the Richmond Heights Senior Center in an amount not to exceed \$895.36 to be funded from the District 9 FY 2011-12 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Dennis C. Moss. It was offered by Commissioner **Jose "Pepe" Diaz**, who moved its adoption. The motion was seconded by Commissioner **Audrey Edmonson** and upon being put to a vote, the vote was as follows:

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

The Chairperson thereupon declared the resolution duly passed and adopted this 3rd day of July, 2012. 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: **Christopher Agrippa**
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 Dennis C. Moss Dist. 9

1. Full legal name of the requesting organization: West Perrine Senior Center

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.): _____

WAYMAN G. BANVERMAN

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

TRANSPORTATION

MIAMI-DADE COUNTY
FEE WAIVER/IN-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): Zoo Miami 4-27-2012 - Senior Tour Zoo Miami

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 9
Zoo Miami 12400 SW 152nd Street

8. Description of regional or local impact:

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

One day tour (2 hours) - bus transportation to and from Zoo Miami

MIAMI-DADE COUNTY
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.

Signature of Authorized Representative

4/19/12
Date

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 Dennis C. Moss Dist. 9

1. Full legal name of the requesting organization: Richmond Heights Senior Center

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.): _____

WAYMAN G. BANNERMAN

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

TRANSPORTATION

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): ZOO MIAMI 4-27-2012 - SENIOR TOUR OF ZOO MIAMI

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 9
ZOO MIAMI 12400 SW 152nd STREET

8. Description of regional or local impact:

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): ONE DAY TOUR (1 to 2 hours) - bus transportation to and from ZOO MIAMI

MIAMI-DADE COUNTY
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.


Signature of Authorized Representative

4/19/12
Date



**MIAMI-DADE COUNTY
PARK & RECREATION DEPARTMENT
INVOICE**

No: 23135

Date: 4-27, 20 12

Please make check payable to: MIAMI-DADE COUNTY

Mail to: PARK & RECREATION DEPARTMENT

To: Office of Commissioner Dennis C. Moss
10710 SW 24th St
Miami FL 33189

FINANCE DIVISION
275 NW 2ND STREET, 3RD FLOOR
MIAMI, FLORIDA 33128

Contact Name: Dallas Manuel

Contact Phone #: 305 234-4938

Customer Number: 400046

Purchase Order #: ---

Facility Name: Zoo Miami

Facility Exp. Index: PREMETSS8000

33 adult 360.36

1 private tour 175.00

Please return green copy with your check

TOTAL \$ 535.36

Deposit Index Code(s)	Project	Project Detail	Sub-Object	G/L Subsidiary	Amount
<u>PREMETSS5001</u>					<u>360.36</u>
<u>PREMETSS5005</u>					<u>175.00</u>

[Handwritten Signature]
5/15/12

Deposit Date _____ ROC#: _____

TOTAL \$ 535.36

Prepared By: Esther Frieiro

Phone: 305 251-0400

RECEIVED
MAY 7 2012
YELLOW TO FINANCE

Memorandum



Date: July 3, 2012

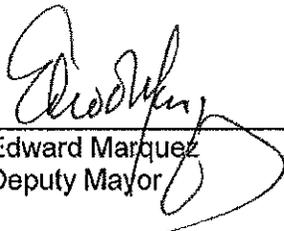
To: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor 

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by West Perrine Senior Center and the Richmond Heights Senior Center, for their "Senior Tour of Zoo Miami" event held on April 27, 2012.

In-kind services have been requested in an amount not to exceed \$535.36 from the Parks, Recreation, and Open Spaces Department for the entrance fee of 33 seniors and a private tour of Zoo Miami; and \$360 from the Community Action and Human Services Department for providing transportation to the event. This event will be funded from the District 9 FY 2011-12 In-Kind Reserve Fund.


Edward Marquez
Deputy Mayor

Inkind012029