

MEMORANDUM

Agenda Item No. 3(A)(5)

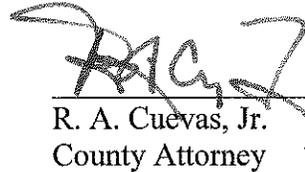
TO: Honorable Chairman Jean Monestime
and Members, Board of County Commissioners

DATE: April 21, 2015

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

SUBJECT: Resolution retroactively
authorizing in-kind services
for the December 13, 2014
"Tree Lighting Festival"
Resolution No. R-279-15

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/smm



MEMORANDUM

(Revised)

TO: Honorable Chairman Jean Monestime
and Members, Board of County Commissioners

DATE: April 21, 2015

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

SUBJECT: Agenda Item No. 3(A)(5)

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
Veto _____
Override _____

Agenda Item No. 3(A)(5)
4-21-15

RESOLUTION NO. R-279-15

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE DECEMBER 13, 2014 "TREE LIGHTING FESTIVAL" SPONSORED BY THE RICHMOND HEIGHTS COMMUNITY ASSOCIATION, INC. IN THE AMOUNT OF \$790.00 TO BE FUNDED FROM THE BALANCE OF DISTRICT 9 FY 2014-15 IN-KIND RESERVE FUND

WHEREAS, the Richmond Heights Community Association, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the December 13, 2014 "Tree Lighting Festival" event in the amount of \$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, the 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 2014-15 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 13, 2014 "Tree Lighting Festival" sponsored by the Richmond Heights Community

Association, Inc. in the amount of \$790.00 to be funded from the balance of the District 9 FY 2014-15 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Dennis C. Moss. It was offered by Commissioner **Esteban L. Bovo, Jr.**, who moved its adoption. The motion was seconded by Commissioner **Sally A. Heyman** and upon being put to a vote, the vote was as follows:

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

The Chairperson thereupon declared the resolution duly passed and adopted this 21st day of April, 2015. 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: **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

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.

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 13, 2014 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 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 positive influence on Richmond Heights and other South-Miami
Dade Community Communities.

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): Set-up begins 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 begins at 5:00 pm. (see attachment #2)

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 29, 2014
Date



1488

**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 221/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Richmond Heights Homeowners Association

EQUIPMENT REQUESTED: Stage 24' x 40'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Dennis Moss,
Commission District #9

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

BILLING ADDRESS/ZIP CODE: 111 NW 1 Street Suite 320 Miami, FL 33128

NAME/TITLE OF THE EVENT: 24th Annual Community Tree Lighting Festival

ADDRESS OF EVENT: Sgt Delancy Park 14450 Boggs Dr

TODAY'S DATE: 12/03/14 DATE (S) & TIME OF EVENT: 12/13/14 5PM - 10PM

SET-UP TIME & DAY: 11AM 12/13/14

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

CONTACT PERSON/PHONE: Barbara Nickerson 305-238-0465

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 In-kind District #9**

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: _____

Commissioner Dennis Moss

Agency/Group: Commission District #9

**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

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

Request for Taxpayer Identification Number and Certification

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

Name (as shown on your income tax return)
Richmond Heights Community 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 33157

List account number(s) here (optional)

Requester's name and address (optional)

Print or type
See Specific Instructions on page 2.

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.

Social security number

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

Employer identification number

5	9	-	2	5	0	2	2	1	9
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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 ▶ *12/2/2014*

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 seized 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.

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 Address11225 SW 152ND STREET
MIAMI, FL 33157

Changed: 01/24/2012

Mailing Address11225 SW 152ND STREET
MIAMI, FL 33157

Changed: 01/24/2012

Registered Agent Name & AddressKing, Beverly E
12873 SW 147th Street
MIAMI, FL 33186

Name Changed: 02/20/2014

Address Changed: 02/20/2014

Officer/Director Detail**Name & Address**

Title P

Nickerson, Barbara L
14201 Polk Street
MIAMI, FL 33176

Title VP

Moore, Francis
 10711 SW 152nd Street
 Miami, FL 33176

Title S

Hughes, Martha
 13833 Van Buren Street
 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
2013	01/22/2013
2014	01/16/2014
2014	02/20/2014

Document Images

02/20/2014 -- AMENDED ANNUAL REPORT	View image in PDF format
01/16/2014 -- ANNUAL REPORT	View image in PDF format
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

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Attachment #2

THE RICHMOND HEIGHTS COMMUNITY ASSOCIATION, INC.

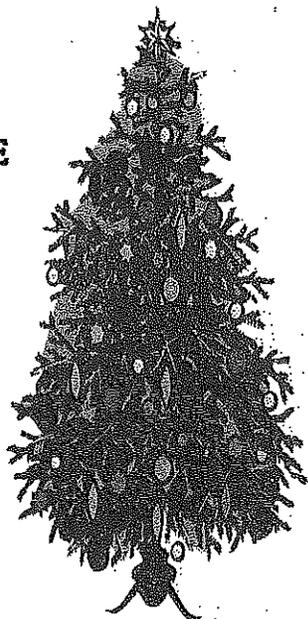
In partnership with
Miami-Dade County Department of Cultural Arts
Miami-Dade County Parks and Recreation
Miami-Dade Police Department



PRESENTS

THE ANNUAL COMMUNITY 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 13, 2014
PLACE: SGT. JOE DELANCY'S PARK
14450 BOGGS DRIVE
RICHMOND HEIGHTS
TIME: 5:00 -10:00 PM

COME ENJOY THIS FAMILY AFFAIR

FEATURING
LOCAL DANCERS & CHOIRS
PROFESSIONAL PERFORMING ARTIST
SINGER & POETS

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

Memorandum



Date: April 21, 2015
To: Honorable Chairman Jean Monestime
and Members, Board of County Commissioners
From: Carlos A. Gimenez
Mayor
Subject: District Specific In-Kind Request

A handwritten signature in black ink, appearing to read "Carlos A. Gimenez".

A retroactive waiver for in-kind services has been requested by the Richmond Heights Community Association, Inc., for its "Tree Lighting Festival" event held on December 13, 2014.

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 24' x 40' stage. This event will be funded from the balance of District 9 FY 2014-15 In-Kind Reserve Funds.

A handwritten signature in black ink, appearing to read "Edward Marquez".

Edward Marquez
Deputy Mayor

Inkind01504