

MEMORANDUM

Agenda Item No. 3(A)(8)

TO: Honorable Chairwoman Audrey M. Edmonson
and Members, Board of County Commissioners

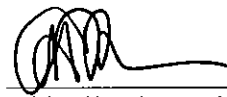
DATE: February 19, 2020

FROM: Abigail Price-Williams
County Attorney

SUBJECT: Resolution retroactively
authorizing in-kind services
from the Parks, Recreation
and Open Spaces Department
for the "2020 Miami Springs
Community Health, Wellness
& Environmental Fair" held on
January 11, 2020 sponsored by
the City of Miami Springs in
an amount of \$1,750.00 to be
funded from the balance of the
District 6 FY 2019-20 In-Kind
Reserve

Resolution No. R-176-20

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor
Vice Chairwoman Rebeca Sosa.



Abigail Price-Williams
County Attorney



APW/smm

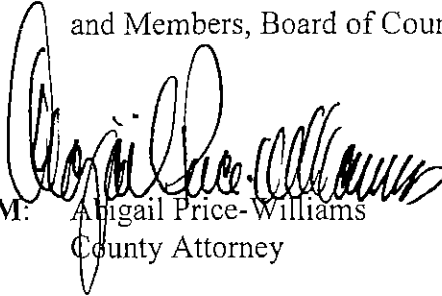


MEMORANDUM

(Revised)

TO: Honorable Chairwoman Audrey M. Edmonson
and Members, Board of County Commissioners

DATE: February 19, 2020

FROM: 
Abigail Price-Williams
County Attorney

SUBJECT: Agenda Item No. 3(A)(8)

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 present ____, 2/3 membership ____, 3/5's ____, unanimous ____, CDMP 7 vote requirement per 2-116.1(3)(h) or (4)(c) ____, CDMP 2/3 vote requirement per 2-116.1(3)(h) or (4)(c) ____, or CDMP 9 vote requirement per 2-116.1(4)(c)(2) ____) 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)(8)
2-19-20

RESOLUTION NO. R-176-20

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE “2020 MIAMI SPRINGS COMMUNITY HEALTH, WELLNESS & ENVIRONMENTAL FAIR” HELD ON JANUARY 11, 2020 SPONSORED BY THE CITY OF MIAMI SPRINGS IN AN AMOUNT OF \$1,750.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 6 FY 2019-20 IN-KIND RESERVE

WHEREAS, the City of Miami Springs has requested in-kind services from the Parks, Recreation and Open Spaces Department for the “2020 Miami Springs Community Health, Wellness & Environmental Fair” held on January 11, 2020 in an amount of \$1,750.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the City of Miami Springs is a municipality located in Miami-Dade County; and

WHEREAS, the “2020 Miami Springs Community Health, Wellness & Environmental Fair” is a free event promoting health and wellness in a family-friendly environment; and

WHEREAS, the “2020 Miami Springs Community Health, Wellness & Environmental Fair” is a small event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$1,750.00 of the in-kind services shall be funded from the balance of the District 6 FY 2019-20 In-Kind Reserve,

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 “2020

Miami Springs Community Health, Wellness & Environmental Fair” held on January 11, 2020 sponsored by the City of Miami Springs in an amount of \$1,750.00 to be funded from the balance of the District 6 FY 2019-20 In-Kind Reserve.

The Prime Sponsor of the foregoing resolution is Vice Chairwoman Rebeca Sosa. It was offered by Commissioner **Audrey M. Edmonson** , who moved its adoption. The motion was seconded by Commissioner **Rebeca Sosa** and upon being put to a vote, the vote was as follows:

Audrey M. Edmonson, Chairwoman			
Rebeca Sosa, Vice Chairwoman			
Esteban L. Bovo, Jr.	aye	Daniella Levine Cava	aye
Jose “Pepe” Diaz	aye	Sally A. Heyman	absent
Eileen Higgins	aye	Barbara J. Jordan	aye
Joe A. Martinez	aye	Jean Monestime	aye
Dennis C. Moss	aye	Sen. Javier D. Souto	aye
Xavier L. Suarez	aye		

The Chairperson thereupon declared this resolution duly passed and adopted this 19th day of February, 2020. 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

Linda L. Cave

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

RLC

Ryan Carlin

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) 375-5188

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 2020 Miami Springs Community Health, Wellness & Envir. Fair

1. Full legal name of the requesting organization: City of Miami Springs

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.):

William Alonso, City Manager, alonso.w@miamisprings-fl.gov
201 Westward Drive, Miami Springs, FL 33166
305-805-5011

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

In-kind service

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):

2020 Miami Springs Community Health, Wellness, & Environmental Fair
Saturday, Jan. 11th, 2020 10-2 p.m.
17x12 stage requested with roof and back
200 Westward Drive, Miami Springs, FL 33166
"Healthy People, Healthy Planet"
5th Annual Free Community Health & Wellness Fair

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)):

Miami Springs Women's Club
200 Westward Drive
Miami Springs, FL 33166

8. Description of regional or local impact:

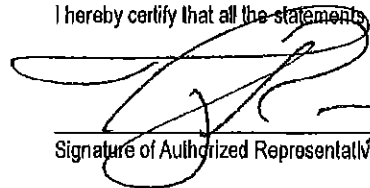
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):

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.

 *Asst. City Mgr.*
Signature of Authorized Representative

1/2/2020
Date



**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 5/(305) 553-8511 (Fax)

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EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: City of Miami Springs

EQUIPMENT REQUESTED: Showmobile Large

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Rebecca Sosa

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

BILLING ADDRESS/ZIP CODE: 28401 SW 167 Ave Homestead, FL

NAME/TITLE OF THE EVENT: 5th Annual Free Community Health & Wellness Fair

ADDRESS OF EVENT: 200 Westward Dr Miami, FL 33166

TODAY'S DATE: 01/07/20

DATE (S) & TIME OF EVENT: 01/11/20 10am – 2pm

SET-UP TIME & DAY: 01/11/20 8am

TAKE-DOWN & DAY: 01/11/20 3pm

CONTACT PERSON/PHONE: William Alonso 305-805-5011

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 also understand that the total fee is to be remitted (15) fifteen working days before the event.

*Fee: \$1,750.00 In-Kind District #6

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: _____

Vice Chairwoman Rebecca Sosa

Agency/Group: Commission District #6

**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

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Memorandum



Date: February 19, 2020

To: Honorable Chairwoman Audrey M. Edmonson
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

A retroactive waiver for in-kind services has been requested by the City of Miami Springs for its "2020 Miami Springs Community Health, Wellness & Environmental Fair" held on January 11, 2020.

In-kind services have been requested in an amount not to exceed \$1,750.00 from the Parks, Recreation and Open Spaces Department for the use of a large show mobile. This event will be funded from the balance of District 6 FY 2019-20 In-Kind Reserve Fund.

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

Jennifer Moon
Deputy Mayor

Inkind01946