

MEMORANDUM

Agenda Item No. 3(A)(5)

TO: Honorable Chairman Oliver G. Gilbert, III
and Members, Board of County Commissioners

DATE: April 4, 2023

FROM: Geri Bonzon-Keenan
County Attorney

SUBJECT: Resolution retroactively
authorizing in-kind services
from the Parks, Recreation
and Open Spaces Department
for the December 18, 2022
“Chanukah in the Park” event
sponsored by Beit David
Highland Lakes Shul, Inc. in
an amount not to exceed
\$790.00 to be funded from
the balance of the District 4
FY 2022-23 In-Kind Reserve

Resolution No. R-248-23

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Micky Steinberg.


Geri Bonzon-Keenan
County Attorney

GBK/ks



MEMORANDUM

(Revised)

TO: Honorable Chairman Oliver G. Gilbert, III
and Members, Board of County Commissioners

DATE: April 4, 2023

FROM: 
Gen Bonzon-Keenan
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
- ☐ 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)(5)
4-4-23

RESOLUTION NO. R-248-23

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE DECEMBER 18, 2022 “CHANUKAH IN THE PARK” EVENT SPONSORED BY BEIT DAVID HIGHLAND LAKES SHUL, INC. IN AN AMOUNT NOT TO EXCEED \$790.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 4 FY 2022-23 IN-KIND RESERVE

WHEREAS, Beit David Highland Lakes Shul, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the December 18, 2022 “Chanukah in the Park” event in an amount not to exceed \$790.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the “Chanukah in the Park” event is a family-oriented gathering with a candle-lighting ceremony to bring the community together; and

WHEREAS, the “Chanukah in the Park” event is a district 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 4 FY 2022-23 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 18, 2022 “Chanukah in the Park” event sponsored by Beit David Highland Lakes Shul, Inc. in an amount not to exceed \$790.00 to be funded from the balance of the District 4 FY 2022-23 In-Kind Reserve.

The Prime Sponsor of the foregoing resolution is Commissioner Micky Steinberg. It was offered by Commissioner **Anthony Rodriguez**, who moved its adoption. The motion was seconded by Commissioner **Oliver G. Gilbert, III** and upon being put to a vote, the vote was as follows:

Oliver G. Gilbert, III, Chairman	aye		
Anthony Rodriguez, Vice Chairman	aye		
Marleine Bastien	aye	Juan Carlos Bermudez	aye
Kevin Marino Cabrera	aye	Sen. René García	aye
Roberto J. Gonzalez	aye	Keon Hardemon	aye
Danielle Cohen Higgins	aye	Eileen Higgins	aye
Kionne L. McGhee	absent	Raquel A. Regalado	aye
Micky Steinberg	aye		

The Chairperson thereupon declared this resolution duly passed and adopted this 4th day of April, 2023. 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

LUIS G. MONTALDO, CLERK AD INTERIM

By: Basia Pruna
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

RC

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) 375-5168

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

Stemberg

1. Full legal name of the requesting organization:

Bert David Highland Lakes Shul

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.):

Jani Campobanco
2600 N.E. 208th St. Aventura, FL 33180
305-935-4140 or 305-318-3877

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

24 x 40 stage

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

12/18/22

Chanukah in the Park

- Community event with candle-lighting,
music, rides, Food, Fire-truck,
Blood Mobile

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)):

cul-de-sac on NE 24th Avenue, just south
of Highland Oaks Park Playground
(intersection of NE 23rd Ave & 207th St.)

8. Description of regional or local impact:

To bring the community
together

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

• Set-up beginning at 12:30pm
• Event begins @ 4pm on 12/18/22

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): - Access Street behind park
- Enter the area at the intersection
of NE 23rd Ave. & 207th St
11. Expected number of participants and estimated attendance (per day, if applicable): 500 + ppl
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): Please see attached

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


Signature of Authorized Representative

11/28/22
Date

Chanukah in the Park
2022 Budget

Rides- \$7,700
Entertainment-\$2,000
Food-\$2,000
Sound-\$1,500
Photography-\$500
Marketing-\$1,500
Staff-\$2000
Misc. (crafts/supplies)-\$800

TOTAL-\$18,000

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

BEIT DAVID HIGLAND LAKES SITU INC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

NON-PROFIT

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

2600 NE 209 ST

Requester's name and address (optional)

6 City, state, and ZIP code

MIAMI, FL 33180

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

65 - 0394819

Part II Certification

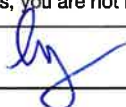
Under penalties of perjury, I certify that:

- 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 for Part II, later.

Sign
Here

Signature of
U.S. person ►



Date ►

11/28/2022

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

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



EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Beit David Highland Lakes Shul

EQUIPMENT REQUESTED: Stage 24' x 40'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Micky Steinberg
Commission District #4

CHARTFIELD INFO (MIAMI-DADE AGENCIES ONLY): _____

BILLING ADDRESS/ZIP CODE: 111 NW 1st Street, Suite 220, Miami, FL

NAME/TITLE OF THE EVENT: Chanukah in the Park

ADDRESS OF EVENT: Highland Oak Park behind Jogger Loop on Street outside

TODAY'S DATE: 11/29/22

DATE (S) & TIME OF EVENT: 12/18/22 4PM – 6PM

SET-UP TIME & DAY: 1PM 12/18/22

TAKE-DOWN & DAY: 7PM 12/18/22

CONTACT PERSON/PHONE: Rabbi Wolf 347-583-9224

AT SITE CONTACT/CELL PHONE#: Jami 305-318-3877

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

Signature: _____

4
*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Rabbi Wolf

Agency/Group: _____

MDC010

Memorandum



Date: April 4, 2023

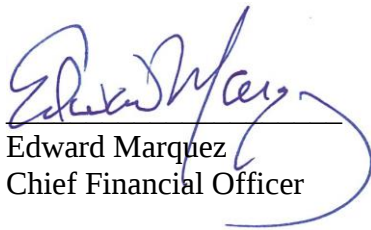
To: Honorable Chairman Oliver G. Gilbert, III
and Members, Board of County Commissioners

From: Daniella Levine Cava
Mayor 

Subject: District Specific In-Kind Request

A retroactive waiver of in-kind services has been requested by the Beit David Highland Lakes Shul Inc. for their “Chanukah in the Park” event held on December 18, 2022.

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 4 FY 2022-23 In-Kind Reserve Fund.


Edward Marquez
Chief Financial Officer