# LAFCO 3206

### **Notice of Filing Attachments:**

## Supplement

3206

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#### SUPPLEMENT ANNEX ATION, DETACHMENT, REORGANIZATION PROPOSALS San Bernardino Collign, DETACHMENT, REORGANIZATION PROPOSALS

**INTRODUCTION:** The questions on this form are designed to obtain data about the specific annexation, detachment and/or reorganization proposal to allow the San Bernardino LAFCO, its staff and others to adequately assess the proposal. You may also include any additional information which you believe is pertinent. Use additional sheets where necessary, and/or include any relevant documents.

1. Please identify the agencies involved in the proposal by proposed action:

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<u>t_</u>	
<i>w</i> requires pre-zc	oning of the territory proposed for annexation. Provi
a. Has pre-zoning been completed? YES ☐ NO ⊠ b. If the response to "a" is NO, is the area in the process of pre-zoning? YES ☐ NO ⊠	
or completion of t	and densities permitted. If the pre-zoning process the process. County Fire District, South Desert Service Zone
	services to the City of Needles and its residents
	ten justification for the proposed boundary
or change be su r fees?	bject to any new or additional special taxes, ar
	d by the Needles City Council
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Will the territory be relieved of any existing special taxes, assessments, district charges or fees required by the agencies to be detached?

No If a Williamson Act Contract(s) exists within the area proposed for annexation to a City, please provide a copy of the original contract, the notice of non-renewal (if appropriate) and any protest to the contract filed with the County by the City. Please provide an outline of the City's anticipated actions with regard to this contract. None Provide a description of how the proposed change will assist the annexing agency in achieving its fair share of regional housing needs as determined by SCAG. N/A

#### 8. PLAN FOR SERVICES:

For each item identified for a change in service provider, a narrative "Plan for Service" (required by Government Code Section 56653) must be submitted. This plan shall, at a minimum, respond to each of the following questions and be signed and certified by an official of the annexing agency or agencies.

A. A description of the level and range of each service to be provided to the affected territory.

Annexation into the County Fire District, South Desert Service Zone, will continue fire protection services to the City of Needles and its residents and businesses. Since the City currently contracts with the County Fire Department there will be no change to the level and range of services to be provided under the County Fire District.

B. An indication of when the service can be feasibly extended to the affected territory. As soon as LAFCO completes its application, review and approval process

C. An identification of any improvement or upgrading of structures, roads, water or sewer facilities, other infrastructure, or other conditions the affected agency would impose upon the affected territory.

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None

- D. The Plan shall include a Fiscal Impact Analysis which shows the estimated cost of extending the service and a description of how the service or required improvements will be financed. The Fiscal Impact Analysis shall provide, at a minimum, a five (5)-year projection of revenues and expenditures. A narrative discussion of the sufficiency of revenues for anticipated service extensions and operations is required.
- E. An indication of whether the annexing territory is, or will be, proposed for inclusion within an existing or proposed improvement zone/district, redevelopment area, assessment district, or community facilities district. <u>Annexation into a fire protection service zone with a parcel tax assessment</u> as determined by the Needles City Council
- F. If retail water service is to be provided through this change, provide a description of the timely availability of water for projected needs within the area based upon factors identified in Government Code Section 65352.5 (as required by Government Code Section 56668(k)).

N/A - no additional retail water service is to be provided other than current

### CERTIFICATION

As a part of this application, the City/Tewn of <u>Needles</u>, or the <u>N/A</u> District/Agency, <u>N/A</u> (the applicant) and/or the <u>N/A</u> (real party in interest landowner and/or registered voter of the application subject property) agree to defend, indemnify, hold harmless, promptly reimburse San Bernardino LAFCO for all reasonable expenses and attorney fees, and release San Bernardino LAFCO, its agents, officers, attorneys, and employees from any claim, action, proceeding brought against any of them, the purpose of which is to attack, set aside, void, or annul the approval of this application or adoption of the environmental document which accompanies it.

This indemnification obligation shall include, but not be limited to, damages, penalties, fines and other costs imposed upon or incurred by San Bernardino LAFCO should San Bernardino LAFCO be named as a party in any litigation or administrative proceeding in connection with this application.

As the person signing this application, I will be considered the proponent for the proposed action(s) and will receive all related notices and other communications. I understand that if this application is approved, the Commission will impose a condition requiring the applicant and/or the real party in interest to indemnify, hold harmless and reimburse the Commission for all legal actions that might be initiated as a result of that approval.

As the proponent, I acknowledge that annexation to the City/<del>Town</del> of <u>Needles</u> or the <u>N/A</u> District/Agency may result in the imposition of taxes, fees, and assessments existing within the (city or district) on the effective date of the change of organization. I hereby waive any rights I may have under Articles XIIIC and XIIID of the State Constitution (Proposition 218) to a hearing, assessment ballot processing or an election on those existing taxes, fees and assessments.

I hereby certify that the statements furnished above and the documents attached to this form present the data and information required to the best of my ability, and that the facts, statements, and information presented herein are true and correct to the best of my knowledge and belief.

DATE December 9, 2015

SIGNATURE

Rick Daniels

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Printed Name of Applicant or Real Property in Interest (Landowner/Registered Voter of the Application Subject Property)

City Manager, City of Needles Title and Affiliation (if applicable)

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/REVISED: km - 8/19/2015