SUPPLEMENT ANNEXATION, 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.

ANNE				tify the agencies involved in the proposal by proposed action:				
	EXED TO		DETACHED FROM					
	city annexation, Sta		zoning of the territory proposed for annexation.	Pro				
a. b.		een completed? YE "a" is NO, is the are	ES NO NO near notes of pre-zoning? YES NO [
		ning classification, ti ing for completion o	tle, and densities permitted. If the pre-zoning prof the process.	oce				
uninco	rporated territory?		ate a totally or substantially surrounded island o	of				

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a co	Williamson Act Contract(s) exists within the area proposed for annexation to a City, please popy of the original contract, the notice of non-renewal (if appropriate) and any protest to the of with the County by the City. Please provide an outline of the City's anticipated actions with his contract.
	ovide a description of how the proposed change will assist the annexing agency in lieving its fair share of regional housing needs as determined by SCAG.

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.
- B. An indication of when the service can be feasibly extended to the affected territory.
- 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.
- 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.

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- 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.
- 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)).

CERTIFICATION

As a part of this application, the City/Tow	yn of	or the	
District/Agency.	(the applicant) and/or the		(real party in
As a part of this application, the City/Tow District/Agency,interest - landowner and/or registered vo harmless, promptly reimburse San Berna release San Bernardino LAFCO, its ager proceeding brought against any of them, of this application or adoption of the envi	ardino LAFCO for all reason ts, officers, attorneys, and the purpose of which is to	nable expenses and attorne employees from any claim, attack, set aside, void, or a	ey fees, and , action,
This indemnification obligation shall inclu			
imposed upon or incurred by San Bernar any litigation or administrative proceeding			d as a party in
As the person signing this application, I vereceive all related notices and other com Commission will impose a condition requal harmless and reimburse the Commission	munications. I understand iring the applicant and/or t	I that if this application is ap he real party in interest to ir	proved, the ndemnify, hold
As the proponent, I acknowledge that an District/Agency		of on of taxes, fees, and asses	or the ssments existing
within the (city or district) on the effective have under Articles XIIIC and XIIID of the processing or an election on those existing	e date of the change of orga e State Constitution (Propo	anization. I hereby waive and sition 218) to a hearing, ass	ny rights I may
I hereby certify that the statements furnis and information required to the best of m herein are true and correct to the best of	y ability, and that the facts		
DATE			
		SIGNATURE	
		applicant or Real Property in oter of the Application Subje	
	(ete. of the Approaction Oubj	out roporty)
	Title and A	Affiliation (if applicable)	