

STANISLAUS LAFCO

Stanislaus Local Agency Formation Commission

1010 – 10th Street, 3rd Floor ♦ Modesto, CA 95354

(209) 525-7660 ♦ FAX (209) 525-7643

www.stanislauslafco.org

FILING REQUIREMENTS FOR SUBMITTING APPLICATIONS

This checklist is provided as a guide for the preparation of a complete application packet to LAFCO. You are required to consult with LAFCO staff prior to the submittal of the packet and copying the completed application.

- ___ 1. Application form completed with **original signatures**.
- ___ 2. Filing fee/Deposit.
- ___ 3. Legal description and map prepared to State Board of Equalization specifications. Provide an original copy, stamped by the engineer on 8½" x 11" paper. *A separate fee for the State Board of Equalization filing will be determined and collected at time of project approval.*
- ___ 4. Vicinity map.
- ___ 5. Evidence of approval. Please check the appropriate items:
 - ___ A. If annexation is to a city, the resolution and map of rezoning is required. Include the CEQA Initial Study and Notice of Determination.
 - ___ B. If annexation to a district, resolution or copy of development approval – tentative subdivision map, use permit, conditions of approval, etc. Include the CEQA Initial Study and Notice of Determination.
 - ___ C. Resolution of city council or district governing board stating it can provide necessary service(s) with documentation supporting the ability to provide services.
- ___ 6. Twenty-five (25) copies of the following: application, legal description, map, vicinity map, evidence of approval (resolutions), initial study, and notice of determination as prepared by the lead agency (or LAFCO environmental questionnaire, if required). *Note: The actual number of copies required will be determined by the Executive Officer at the pre-submittal meeting.*
- ___ 7. Two (2) sets of labels including the property owners and registered voters within the boundaries of the proposal as well as property owners within 300ft of the proposal (provide map showing this area).

If you have any questions regarding your proposal or preparation of your packet, please contact the LAFCO staff at (209) 525-7660.

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APPLICATION FOR (Check all that apply):

- Sphere of Influence Amendment
- Reorganization
- Annexation to: City of: _____ District: _____
- Detachment from: City of: _____ District: _____
- Formation of a Special District: - Type of District: _____
- Other: _____

NAME OF PROPOSAL: _____

GENERAL DESCRIPTION OF PROPOSAL:

REASONS FOR PROPOSAL:

LOCATION AND ADDRESSES OF PARCEL(S):

APPLICANT:
Name: _____
Address: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____

APPLICANT'S REPRESENTATIVE:
Name: _____
Address: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____

LAFCO Use Only:	
Proposal Name: _____	LAFCO Application No. _____
Submittal Date: _____	Cert. of Filing Date: _____
LAFCO Filing Fee: \$ _____	Fees Paid? _____ Yes _____ No
SBOE Fee: \$ _____	Fees Paid? _____ Yes _____ No
100% Property Owners Consent? _____	Yes _____ No _____
Territory Uninhabited? _____	Yes _____ No _____

PROPERTY OWNER(S):

If multiple property owners, please provide the names, with address information, on a separate page.

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

SUBJECT AGENCIES WITHIN PROPOSAL AREA THAT WILL GAIN OR LOSE TERRITORY:

If more than three affected agencies, please provide the names and information on a separate page.

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Contact Person: _____ Title: _____

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Contact Person: _____ Title: _____

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Contact Person: _____ Title: _____

AFFECTED AGENCIES WITHIN PROPOSAL AREA (Agencies that may have overlying boundaries or sphere of influence). If more than two affected agencies, please provide the names and information, on a separate page:

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Contact Person: _____ Title: _____

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Contact Person: _____ Title: _____

INTERESTED AGENCIES (Agencies which provide facilities or services to proposal area): If more than two interested agencies, please provide the name and information, on a separate page.

Name: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Contact Person: _____ Title: _____

Name: _____
Address: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____

PERSONS REQUESTING TO BE NOTIFIED:

If more than two names, please provide the names and information on a separate page.

Name: _____
Address: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____

Name: _____
Address: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____

SCHOOL DISTRICTS (School District(s) affected by proposal):

Name: _____
Address: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____

Name: _____
Address: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____

Please respond to all items in this questionnaire, and indicate N/A when a question does not apply. Any additional information that is pertinent to the application filing should be included in the application at the time of submittal.

I. LANDOWNER CONSENT

Have all property owners involved with the proposal given their written consent?

- YES (if yes, please attach the original signed petitions, letters or applications)
- NO (if no, please attach the petitions, letters or applications with the original signatures of those consenting and provide the name, address and APN of those property owners not consenting.)

II. REGISTERED VOTER INFORMATION

Please provide a list of registered voters and their addresses within the boundaries of the proposal. This information can be obtained from the Stanislaus County Elections Office.

III. LAND USE

A. Area of Proposal (Acres – Indicate Gross and/or Net): _____

B. Land Uses of Proposed Area:

	EXISTING	PROPOSED
Zoning	<input type="checkbox"/> City <input type="checkbox"/> County	<input type="checkbox"/> City <input type="checkbox"/> County
General Plan Designation	<input type="checkbox"/> City <input type="checkbox"/> County	<input type="checkbox"/> City <input type="checkbox"/> County
Use of Proposal Area		

C. Surrounding Land Uses:

	Describe (including specific uses)	Zoning	General Plan Designation	City or County Designation
North				<input type="checkbox"/> City <input type="checkbox"/> County
South				<input type="checkbox"/> City <input type="checkbox"/> County
East				<input type="checkbox"/> City <input type="checkbox"/> County
West				<input type="checkbox"/> City <input type="checkbox"/> County

D. Describe any public easements/oil well operations/cellular site leases, etc. that currently exist on the site:

E. Evidence of approval. Are there any land use entitlements involved in the project or contract? If yes, please provide a copy of the documentation for this entitlement. Please check those documents, which may apply:

- Tentative Map and Conditions
- Subdivision Map or Parcel Map
- Specific Plan
- Rezoning
- General Plan Amendment
- Rezoning
- Other - (provide explanation):

VIII. PLAN FOR PROVIDING PUBLIC SERVICES

A. New Development:

1. Is the reorganization requested for a proposed development? Yes No
2. If yes, what services will be provided to subject property: (Please attach any "Intent to Serve" letters for water and/or sewer services). If sewer and/or water agency annexation is also part of the request, please complete supplemental information as well, including attachment of relevant studies/master plans. Use additional sheets if necessary.

(A)	(B)	(C)	(D)	(E)	(F)
Service	Current Service Provider	Level & Range of Service	To be Provided by this Proposal?	If YES to (D), Approx. Date Service Will Be Available	If YES to (D), Method to Finance
WATER					
SEWER					
POLICE					
FIRE					

Note: Evidence must be included to demonstrate the timely availability of water supplies adequate for projected needs (Government Code Section 56668).

B. Assessment and Indebtedness of Service Areas:

1. Does the City/District/County have current plans to establish any new assessment districts in order to pay for new or extended service(s) to the proposal area?
 Yes No
 If yes, please describe: _____
2. Will the subject territory assume any existing bonded indebtedness upon annexation to the City/District?:
 Yes No
 How will indebtedness be repaid? (e.g., property taxes, assessments, service fees):

3. Will the proposal area be subject to special assessments or fees?:
 Yes No
 Explain: _____

C. Sewer Information:

1. Is extension of sewer service part of this application? Yes No
2. Is a developed parcel requesting annexation due to failed septic system?
 Yes No
(If yes, please include a copy of any letters from the Environmental Health Department of private septic system company)
3. Is the subject parcel(s) within the sphere of influence of a district or city that provides public sewer service? Yes No
If yes, which agency? _____
4. Has the agency that will be providing service issued an "Intent to Serve" letter?

(If yes, please attach letter to application) Yes No

If no: Will the agency be prepared to furnish sewer service upon annexation?
 Yes No

Does the agency have the necessary contractual and design capacity to provide sewer service to the proposed area? Yes No
If no, please describe the agency's plan to increase capacity: _____

5. Indicate the method of financing improvements and on-going operations (e.g., general property tax, assessment district, landowner/developer fees, etc.):

6. What is the distance for connection to the agency's existing sewer system?:

D. Water Information:

1. Is extension of water part of this application? Yes No
2. Is a well or other on-site water system currently used on this property? Yes No
3. Is the subject parcel(s) within the sphere of influence of a district or city that provides public water service?
If yes, which agency? _____
4. Please list:
Wholesale Water Agency: _____
Retail Water Agency: _____
5. Has the agency that will be providing service issued an "Intent to Serve" letter?
 Yes No (If yes, please attached letter to application)

If no: Will the agency be prepared to furnish water service upon annexation?
 Yes No

Does the agency have the necessary contractual and design capacity to provide water service to the proposed area? Yes No

If no, please describe the agency's plan to increase capacity: _____

6. Indicate the method of financing improvements and on-going operations (e.g. general property tax, assessment district, landowner/developer fees, etc.):

7. What is the distance for connection to the agency's existing water system?

E. Police Service

1. If annexation to the City, what are the existing police service levels provided within the City limits? _____

2. What level of police services will be provided to the area upon full development?

Will the service levels be maintained? Yes No

If yes, how will the City finance or maintain existing service levels to the area (master service plans, CIP, etc.)? Explain: _____

F. Fire Protection Service

1. If annexation to the City, what are the existing fire protection service levels provided within the City limits? _____

2. What level of fire protection services will be provided to the area upon full development?

Will the service levels be maintained? Yes No

If yes, how will the City finance or maintain existing service levels to the area (master service plans, CIP, etc.)? Explain: _____

3. What are the "Insurance Services Office (ISO)" Class ratings of the affected agencies?
City _____ District _____

IX. ENVIRONMENTAL ANALYSIS

A. Lead Agency for project: _____

B. The project:

- Is exempt under CEQA Guidelines Section _____ Class _____ Title _____ and a Notice of Exemption has been prepared by the lead agency (please attach).
- Will have no significant adverse environmental impacts and a Negative Declaration was prepared. ND# _____ (Please attach.)
- May have significant adverse environmental impacts and in accordance with Section 15070 of the CEQA Guidelines, a Mitigated Negative Declaration (MND) has been certified by the lead agency. ND # _____ (Please attach.)

List impact areas in the MND that propose mitigation measures to lessen the environmental impacts to less than significant: _____

- Will have significant adverse environmental impacts and the lead agency has prepared an Environmental Impact Report (EIR). (Please attach)

List impact areas that were found to be unmitigatable in the EIR: (Attach any Statement of Overriding Considerations, applicable) _____

Please note: Include with the above requested attachments the complete environmental documentation (e.g., Initial Study, NOD, NOE, EIR, etc.) and copies of receipts from any filing fees paid (including Fish & Game fees).

X. SPHERE OF INFLUENCE APPLICATION

Sphere of Influence Supplemental Application has been included? Yes No

XI. CERTIFICATION

I certify, under penalty of perjury, under the laws of the State of California, that the information contained in this application is true and correct. I acknowledge and agree that the Stanislaus Local Agency Formation Commission is relying on the accuracy of the information provided and my representations in order to process this application proposal.

Print Name: _____ Title: _____

Signature: _____ Date: _____

- City or District Applicant
- Property Owner Applicant
- Applicant's Representative/Agent

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INDEMNITY AGREEMENT

As part of this application, the applicant agrees to defend, indemnify, hold harmless and release the Stanislaus Local Agency Formation Commission (LAFCO), its officers, employees, attorneys, or agents from any claim, action or proceeding brought against any of them, the purpose of which is to attack, set aside, void, or annul, in whole or in part, LAFCO's action on a proposal or on the environmental documents submitted to support it. This indemnification obligation shall include, but not be limited to, damages, costs, expenses, attorney fees, and expert witness fees that may be asserted by any person or entity, including the applicant arising out of or in connection with the application.

Date: _____

APPLICANT OR APPLICANT'S REPRESENTATIVE:

(Proof of authority must be provided)

Signature: _____

Name: _____

Title: _____

Agency: _____

Address: _____

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COMPLIANCE WITH POLITICAL EXPENDITURE AND CONTRIBUTION DISCLOSURE REQUIREMENTS

Effective January 1, 2008: Pursuant to Government Code Sections 56700.1 and 57009 of the Cortese-Knox-Hertzberg Local Government Reorganization Act of 2000, and 82015 and 82025 of the Political Reform Act, applicants for LAFCO approvals and those opposing such proposals are required to report to LAFCO all political contributions and expenditures with respect to the proposal that exceed \$1,000. LAFCO has adopted policies to implement the law which are attached to this application. By your signature to this application, you are binding the applicant to abide by these disclosure requirements. You are further agreeing that should LAFCO be required to enforce these requirements against you (or if the agency is the formal applicant, the real party in interest) that you will reimburse LAFCO for all staff cost and legal fees, and litigation expenses incurred in that enforcement process.

Date: _____

APPLICANT OR APPLICANT'S REPRESENTATIVE:

(Proof of authority must be provided)

Signature: _____

Name: _____

Title: _____

Agency: _____

Address: _____

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FINANCIAL DISCLOSURE STATEMENT

Consistent with the requirements of the State of California Fair Political Practices Commission, each applicant or their agent must complete and submit this Statement of Disclosure form with any application that requires discretionary action by Stanislaus LAFCO (Government Code §84308 of the Political Reform Act).

Person is defined as: "Any individual, firm, co-partnership, joint venture, association, social club, fraternal organization, corporation, estate, trust, receiver, syndicate, this and any other county, city and county, city, municipality, district or other political subdivision, or any other group or combination acting as a unit."

1. List the names of all persons having any ownership interest in the property involved or any financial interest in the application. (Use additional sheets if necessary.)

2. If any person identified pursuant to #1 is a corporation or partnership, list the names of all individuals owning more than 10% of the shares in the corporation or owning any partnership interest in the partnership.

3. If any person identified pursuant to #1 is a non-profit organization or a trust, list the names of any person serving as director of the non-profit organization or as trustee or beneficiary or trustor of the trust.

4. Has any person identified pursuant to #1 had \$250 or more worth of business transacted with any Commissioner or Alternate or Commission staff person within the past 12 months? Yes / No

If Yes, please indicate person's name/s:

5. Has any person identified pursuant to #1, or his or her agent, contributed \$250 or more to any Commissioner or Alternate within the past 12 months? Yes / No

If Yes, please indicate person(s) or agent(s) making contribution:

Name/s of Commissioner(s)/Alternate(s) receiving contribution:

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Applicant Signature: _____

Printed Name: _____

Date: _____