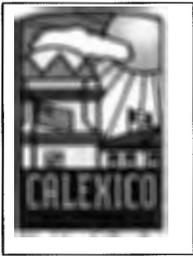


**AGENDA
ITEM**

20



AGENDA STAFF REPORT

DATE: March 20, 2019

TO: Mayor and City Council

APPROVED BY: David B. Dale, City Manager 

PREPARED BY: Ralph Morales, Building/Planning/Code Enforcement Manager 

SUBJECT: Discussion and Potential Action Regarding Auti Fundacion Request for Waiver of Temporary Use Permit Filing Fee

=====

Recommendation:

Discuss and take action regarding Auti Fundacion request for waiver of Temporary Use Permit filing fee.

Background:

Auti Fundacion is a 501 (c) (03) tax-exempt nonprofit that works and support families with autism by commemorating Autism Awareness Month by displaying blue lights at residencial homes and businesses as well as.

On April 2, 2019 at 6 p.m. Auti will be inaugurating the event in front of city hall requesting that City Hall light up the building with blue lights. The public is also invited to join in the celebration and encourage all to wear blue on behalf of all persons with disabilities which is being requested to have the event in front of city hall.

Discussion & Analysis:

The City requires a temporary use permit in order to allow this type of event. The filing fee for the permit application is \$135. City of Calexico Resolution 10-17, adopted March 2, 2010, vests exclusive authority with the City Council to reduce or wave fees and charges owed to the city. The Council is requested to consider waiving the Temporary Use Permit filing fee for Auti Fundacion. Please note that if this waiver request is approved, it may lead to additional requests for waiver of permit application fees by other non-profit groups in the future.

**AGENDA
ITEM**

Fiscal Impact:

(\$135.00) filing fee.

Coordinated With:

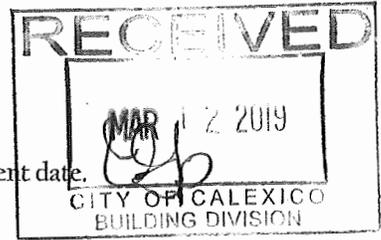
None.

Attachments:

1. Temporary Use Permit application/City Department comments.
2. Letter requesting waiver of TUP fees.
3. Locations for Solicitation.



Development Services Department
 Planning Division
 "Temporary Use Permit"



Request must be submitted a MINIMUM of 15 days in advance of the event date.

- REQUIRED ATTACHMENTS:**
1. Submit one (1) site plan depicting use (minimum size 8 1/2" x 11").
 2. Written proof of approval from property owner.
 3. Copy of the City of Calexico Business License, if applicable.
 4. Insurance coverage naming the City as additional insured (\$1,000,000 minimum per occurrence).
 5. Non-refundable application filing fee

Applicant Name: AUTIFUNDACION Date Submitted: 3/12/19
 Applicant Address: 1060 MEADOW DR, SUITE 219 Phone Number: (760) 819-8501
 Company Name: _____ Alt. Phone Number: (619) 261-1609
 Location of Event: CITY HALL Bus. Lic. Number: _____

Date of Event: 4/2 to 4/2 Total Days: 1
 Time of Event: 6:00pm to 7:00pm

Describe in detail the type of event (attach additional sheets if needed): TO CELEBRATE AUTISM AWARENESS MONTH, AMTI FUNDACION IS PLANNING TO INVITE CALEXICO CITY HALL TO "LIGH UP" CITY HALL AND RELEASE BALLOONS ON TUESDAY, APRIL 2, 2019 AT 6 PM. THE PUBLIC WILL BE INVITED AND NO COST WILL INCURRED BY THE CITY OF CALEXICO.

Applicant Signature: [Signature] Date: March, 12, 19

(For City Use Only)

City Department	Recommendation by Dept. Head		Signature:
Administration	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Fire	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Police	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Finance/HR Director	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Community Services	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Public Works/Engineering Director	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Public Works Manager	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Planning Division	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Risk Management	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Operations/Maintenance Supervisor	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Other:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	

Conditions of Approval: _____

ALL TEMPORARY USE PERMIT MUST COMPLY WITH ZONING ORDINANCE, SECTION 17.11.120 "TEMPORARY USE REGULATIONS".

Approved Denied By: _____ Date: _____
 Director of Planning & Development Services

(Please read reverse side, Section 17.11.120 "Temporary Use Regulations")



Community Development Department
"Temporary Use Permit"
SPECIAL EVENTS

REQUEST MUST BE SUBMITTED A MINIMUM OF 15 DAYS IN ADVANCE OF
 THE EVENT DATE

In order to better provide service in making your event a success, please fill out and submit to the City Planning Division. All requests will be considered, however no guarantee is given that staff and/or equipment may be available.

Please complete the following:
 (Print or Type)

Date Submitted: _____ Date of Event _____ to _____
 Type of Event _____
 Signature of Applicant: _____
 Print or type name: Karina Guljachs/Javier Moreno Date _____
 Name of Contact Person _____ Phone Number: _____
 Describe the type of assistance requested: _____
 Describe the benefits to the city and/or the community this event will provide: _____
 Address of Event _____ Total days of event: _____

Will any City Assistance be requested? Yes No _____
 From which department? Public Works Fire _____ Other
 If so, describe type of assistance: Portium, installation of light bulbs/front of the building (light bulbs will be provided), turn on lights at certain time - 6:30pm, trash bins, closing Heber Ave - in front of city Hall

(For City Use Only)

Departments must fax their response to the City Planning Division within 48 hours of receipt

City Department	Estimated Cost to Dept. (include staff time & equipment)	Recommendation by Dept. Head		
		Signature:		
Administration		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Fire Dept.		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Police Dept.		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Utilities Services		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Community Services		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Economic Agency		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Human Resources		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Planning Division		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Engineering Division		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
General Services		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Other:		<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	

Conditions of Approval: _____

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **AUG 22 2017**

AUTI BAJA CALIFORNIA FUNDACION
INTERNATIONAL A C
1213 ROSAS ST
CALEXICO, CA 92231

Employer Identification Number:
36-4856158
DLN:
17053117308007
Contact Person:
MR. MARTINEZ ID# 31318
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
September 2, 2016
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.



March 12, 2019

Luis Pacheco
City Mayor
City of Calexico
608 Heber Avenue
Calexico, CA 92231

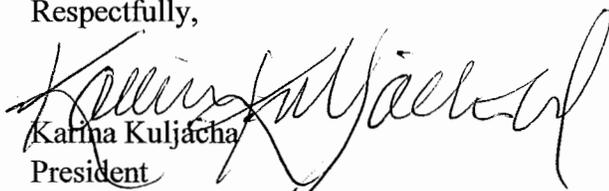
Honorable Mayor Pacheco,

Each year, people all around the U.S. show their support for those living with autism by displaying blue lights on their homes and businesses. I am writing to ask you to join us in commemorating Autism Awareness Month by lighting City Hall in blue light. We therefore ask as the city to help us inaugurate the event in front of city hall on Tuesday, April 2, 2019 at 6 p.m. A brief speaking program with City officials and other dignitaries will follow.

Our efforts toward this event will be inviting the public to join in the celebration and will be encouraged to wear blue on behalf of all persons with disabilities. The event will feature refreshments and blue balloons for all. Please note the event will be at no expense to the city and city will not incur any cost for this event. We respectfully ask that you waive the Temporary Use Permit Application Filing Fee of \$135 for this event.

In closing, we have contacted the media outlets for these events April 2 – May 6 for your reference and in case you are contacted by the press. Your acceptance on this request is highly appreciated. Please feel free to contact me if you have any questions at (760)8-79-8509 or www.autifundacion.org

Respectfully,


Karina Kuljacha
President
AutiFundación, Valle Imperial

