

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 TO MODIFY SPHERES OF INFLUENCE

This checklist is provided as a guide for the preparation of a complete sphere of influence application packet to LAFCO. **You are required to consult with LAFCO staff prior to the submittal of the packet and copying the completed sphere of influence application.** If you have any questions regarding your proposal or preparation of your application packet, please contact the LAFCO staff at (209) 525-7660.

- ___ 1. Completed Sphere of Influence Supplemental Applicant Form with **original signatures** and required attachments.
- ___ 2. Filing fee (deposit) payable to Stanislaus LAFCO. (See [Schedule of Fees and Deposits.](#))
- ___ 3. Map of proposed sphere of influence modification on 8½"x11" paper that clearly delineates the agency's existing and proposed sphere of influence, as well as the current boundary of the agency.
- ___ 4. Proof of Compliance with the California Environmental Quality Act (CEQA): Include the CEQA Negative Declaration, Mitigated Negative Declaration or Certified EIR, as well as the Notice of Determination and copy of Fish & Wildlife Receipt. *Please Note: If CEQA has not already been completed for the proposal and LAFCO is acting as Lead Agency, additional fees will be required.*
- ___ 5. Plan for Agricultural Preservation: For sphere of influence expansions or annexations to a city or special district providing one or more urban services (i.e. potable water, sewer) that includes agricultural lands, a Plan for Agricultural Preservation must be provided, consistent with Commission Policy 22.
- ___ 6. Municipal Service Review Update: In accordance with Government Code Section 56430, changes to a sphere of influence require that a Municipal Service Review be prepared prior to or in conjunction with the sphere change. *Please consult with LAFCO Staff regarding compliance with this section.*
- ___ 7. Any pertinent reports, studies and other information that will assist the LAFCO staff in reviewing the application's compliance with State Law and LAFCO policies (i.e. General Plan, Master Facility Plans, Financing Plans).
- ___ 8. For city sphere of influence changes only: Proof of compliance with Government Code Section 56425(b) regarding consultation with the County (e.g. adopted resolution).
- ___ 9. For applications with lengthy support documents, digital copies may be requested for the Commission.
- ___ 10. Two (2) sets of labels for property owners within the boundaries of the proposal and one (1) set of labels for property owners within a 300ft radius, outside the proposal area (provide a map showing this area).

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

SPHERE OF INFLUENCE SUPPLEMENTAL APPLICATION

Government Code Section 56425(e) of the Cortese-Knox-Hertzberg Local Government Reorganization Act of 2000 provides that the Commission shall consider and prepare a written statement of its determinations with respect to certain factors prior to making a decision. Please answer the following questions/factors required for sphere of influence determinations. These answers can be written on this form or attached as a separate submittal, as necessary.

Sphere of Influence for the _____
(Name of City or District)

Purpose of the Proposal

1. Why is this proposal being filed? List all actions for LAFCO approval. Identify other actions that are part of the overall project, i.e., a tract map or development permit.

Description of area to be included in the sphere

2. What area is proposed to be included in the sphere? What is the acreage involved? (Attach a map identifying the current sphere and the proposed modification.)
3. Why was it decided to use these particular boundaries? Do they align with existing roads, canals, or other geographical features?

For City Changes Only:

4. Have the City and the County met with regard to an agreement on boundaries, development standards and zoning requirements for land in the proposed sphere as required by Government Code Section 56425? Yes No

If yes, please provide a copy of the agreement or evidence of the consultation (e.g. adopted resolution). If no, please explain the status of this meeting:

5. For cities, Stanislaus LAFCO also adopts a Primary Area of Influence, intended to reflect a more near-term growth boundary (0-10 years). Does the proposal include amendment to the Primary Area? If so, please describe:

Relationship to Existing Plans

6. Describe current County general plan and zoning designations for the proposal area.

7. Describe any City general plan and rezoning designations for the proposal area.

Environmental Assessment

8. What is the underlying project? Who is the lead agency? What type of environmental document has been prepared for the proposed project?

Justification

9. To assist LAFCO in making determinations pursuant to Government Code §56425, please provide information relevant to each of the following:

A. Present and planned uses in the area, including agricultural and open-space lands:

B. Present and probable needs for public facilities and services in the area:

C. Present capacity of public facilities and adequacy of public services that the agency provides or is authorized to provide:

D. Existence of any social or economic communities of interest in the area:

E. For an update of a sphere of influence of a city or special district that provides public facilities or services related to sewers, municipal and industrial water, or structural fire protection, the present and probably need for those public facilities and services of any disadvantaged unincorporated communities within the existing sphere of influence:

Additional Comments

10. Provide any other comments or justifications regarding the proposal.

11. List up to three persons to receive copies of the LAFCO notice of hearing and staff report.

Name

Address

12. Who should be contacted if there are questions about this application?

Name

Address

Phone

Signature _____

Date _____

STANISLAUS LAFCO

Stanislaus Local Agency Formation Commission

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

(209) 525-7660 ♦ FAX (209) 525-7643

www.stanislauslafco.org

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: _____

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

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. 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: _____

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

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 \$500 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 \$500 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: _____