

RESOLUTION NO. 2023-12

A RESOLUTION OF THE HEBER PUBLIC UTILITY DISTRICT TO PROVIDE A TEMPORARY EXTENSION OF WATER SERVICE TO SEBASTIAN HARVESTING

WHEREAS, the Heber Public Utility District provides water, wastewater, solid waste, parks, and recreation services to the community of Heber; and

WHEREAS, Heber Public Utility District is seeking Imperial Local Agency Formation Commission (Imperial LAFCO) to extend Temporary Water Service to Sebastian Harvesting; and

WHEREAS, the extension of water service is outside the Heber Public Utility District service area; and

WHEREAS, Sebastian Harvesting will utilize the water to wash and sanitize harvesting equipment at various fields within Imperial County; and

WHEREAS, it is in the best interest of the Heber Public Utility District to enter into an agreement with Sebastian Harvesting to provide a temporary water service.

NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE HEBER PUBLIC UTILITY DISTRICT, DOES HEREBY RESOLVE AS FOLLOWS:

1. That the foregoing is true, correct, and adopted.
2. The District shall provide the total amount of gallons used upon completion to Imperial County LAFCO

PASSED AND ADOPTED at a regular meeting of the Board of Directors of the Heber Public Utility District held on the 19th day of October 2023.

Tony Sandoval, Board President

ATTEST:

Moises G. Cardenas, Clerk of the Board

APPROVE AS TO FORM:

Steven M. Walker, General Counsel

STATE OF CALIFORNIA)
COUNTY OF IMPERIAL)
HEBER PUBLIC UTILITY)
DISTRICT)

I, Moises Cardenas, Clerk of the Board of the Heber Public Utility District, County of Imperial, State of California, DO HEREBY CERTIFY that the foregoing resolution was dully passed, approved and adopted by the Board of Directors of the Heber Public Utility District at its regularly scheduled meeting held on the 19th day of October 2023.

By _____
Moises G. Cardenas, Clerk of the Board



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APPLICATION

PETITION FOR PROCEEDINGS PURSUANT TO THE CORTESE-KNOX-HERTZBERG LOCAL GOVERNMENT REORGANIZATION ACT OF 2000

The undersigned hereby petition(s) the Local Agency Formation Commission of Imperial County for approval of a proposed change of organization, and stipulate(s) as follows:

OWNER INFORMATION	
NAME Sebastian Harvesting	COMPANY Braga
MAILING ADDRESS Po box 66	TELEPHONE NUMBER (831) 744-5650
CITY, STATE, ZIP Seledad CA 93960	EMAIL ADDRESS Jose.Chavez@BragaFresh.com
APPLICANT INFORMATION (IF DIFFERENT FROM THE OWNER)	
NAME Jose m chavez	COMPANY Sebastian Harvesting
MAILING ADDRESS Po box 66 s	TELEPHONE NUMBER sebr (831) 744-5650
CITY, STATE, ZIP Seledad CA 93960	EMAIL ADDRESS Jose.Chavez@BragaFresh.com
PROJECT INFORMATION	
NAME OF PROPOSAL	DATE
PROJECT ADDRESS	APN(S)
CITY, STATE, ZIP	TOTAL LAND AREA (ACRES)
THIS PROPOSAL IS MADE PURSUANT TO CALIFORNIA GOVERNMENT CODE (COMMENCING WITH SECTION 56000, CORTESE-KNOX-HERTZBERG LOCAL GOVERNMENT REORGANIZATION ACT OF 2000).	
1	PROPOSED CHANGE(S) OF ORGANIZATION: <input type="checkbox"/> ANNEXATION <input type="checkbox"/> SPHERE OF INFLUENCE <input type="checkbox"/> OTHER <input type="checkbox"/> DETACHMENT <input type="checkbox"/> CONSOLIDATION <input checked="" type="checkbox"/> EXTENSION OF SERVICES <input type="checkbox"/> INCORPORATION <input type="checkbox"/> FORMATION OF _____
2	NAME OF THE CITY/SPECIAL DISTRICT BEING AFFECTED

3	<p>THE PROPOSED BOUNDARIES OF THE TERRITORY(IES) INCLUDED IN THE PROPOSAL ARE AS DESCRIBED IN THE EXHIBIT(S) ATTACHED HERETO AND BY THIS REFERENCE INCORPORATED HEREIN.</p> <p><input type="checkbox"/> YES, BOUNDARY EXHIBITS ARE ATTACHED</p>
4	<p>PLEASE LIST ANY OTHER DOCUMENTS BEING SUBMITTED WITH THE APPLICATION (EXCEPT THOSE ALREADY REQUIRED BY LAFCO).</p> <p>_____</p> <p>_____</p>
5	<p>THE TERRITORY(IES) INCLUDED IN THE PROPOSAL IS/ARE: <input type="checkbox"/> UNINHABITED <input type="checkbox"/> INHABITED (12 OR MORE REGISTERED VOTERS)</p>
6	<p>CURRENTLY, THE TERRITORY(IES) INCLUDED IN THE PROPOSAL IS/ARE: <input type="checkbox"/> DEVELOPED <input type="checkbox"/> UNDEVELOPED</p>
7	<p>IS THIS PROPOSAL CONSISTENT WITH THE SPHERE OF INFLUENCE OF THE AFFECTED CITY AND/OR DISTRICT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>
8	<p>PLEASE DESCRIBE IN DETAIL THE REASONS FOR THE PROPOSED CHANGE OF ORGANIZATION (ANNEXATION, DETACHMENT, ETC). USE ATTACHED SHEET IF NECESSARY.</p> <p><i>provide water for one more year to clean farming equipment.</i></p>
9	<p>THE PROPOSED CHANGE OF ORGANIZATION IS REQUESTED, SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:</p> <p>_____</p> <p>_____</p>
10	<p>WOULD THIS PROPOSAL CREATE AN ISLAND OF UNINCORPORATED TERRITORY? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>IF YES, PLEASE EXPLAIN.</p> <p>_____</p> <p>_____</p>
11	<p>IS THERE A GOOD LIKELIHOOD OF A SIGNIFICANT INCREASE IN POPULATION IN THE SUBJECT AREA WITHIN THE NEXT TEN YEARS?</p> <p>IN UNINCORPORATED AREAS? <input type="checkbox"/> YES <input type="checkbox"/> NO IN INCORPORATED AREAS? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>ESTIMATED ADDITIONAL POPULATION: _____</p>
12	<p>WHAT IS THE EXISTING ZONING? _____</p> <p>WHAT IS THE PROPOSED ZONING? _____</p>

13	<p>HAS OR IS THE AREA BEEN/BEING PRE-ZONED? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>WHAT IS THE PRE-ZONING CLASSIFICATION? _____</p> <p>WHAT DATE WAS THIS PRE-ZONED? _____</p>
14	<p>WHAT IS THE PLANNED GENERAL PLAN DESIGNATION OF THE AREA BY THE AFFECTED CITY?</p> <p>_____</p> <p>_____</p>
15	<p>DESCRIBE ANY SPECIAL LAND USE CONCERNS EXPRESSED IN THE ABOVE PLANS.</p> <p>_____</p> <p>_____</p>
16	<p>SPECIFY ANY AND ALL EXISTING LAND USES. _____</p> <p>_____</p> <p>WHAT ARE THE PROPOSED LAND USES? _____</p> <p>DESCRIBE YOUR PROJECT IN DETAIL: _____</p> <p>_____</p> <p>_____</p>
17	<p>DOES THE APPLICATION CONTAIN 100% WRITTEN CONSENT OF EACH PROPERTY OWNER IN THE SUBJECT TERRITORY? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>
18	<p>WILL THE ANNEXED TERRITORY BE LIABLE FOR ITS SHARE OF EXISTING BONDED INDEBTEDNESS? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>
19	<p>WILL THE ANNEXED TERRITORY BE INCLUDED WITHIN ANY PARTICULAR TAX DIVISION OR ZONE OF THE ANNEXING TERRITORY? PLEASE SPECIFY.</p> <p>_____</p> <p>_____</p>
20	<p>IF THE PROPOSAL INCLUDES THE CONSOLIDATION OF SPECIAL DISTRICTS, THE PROPOSED NAME OF THE CONSOLIDATED DISTRICT IS:</p> <p>_____</p> <p>_____</p>
21	<p>IF AN INCORPORATION IS INCLUDED IN THE PROPOSAL:</p> <p>(A) THE NAME PROPOSED FOR THE NEW CITY IS:</p> <p>_____</p> <p>(B) PROVISIONS ARE REQUESTED FOR APPOINTMENT OF:</p> <p>(i) CITY MANAGER <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>(ii) THE CITY CLERK AND CITY TREASURER <input type="checkbox"/> YES <input type="checkbox"/> NO</p>

22	<p>IF THE FORMATION OF A NEW DISTRICT(S) IS INCLUDED IN THE PROPOSAL:</p> <p>(A) THE PRINCIPAL ACT(S) UNDER WHICH SAID DISTRICT(S) IS/ARE PROPOSED TO BE FORMED IS/ARE:</p> <p>_____</p> <p>_____</p> <p>(B) THE PROPOSED NAME(S) OF THE NEW DISTRICT(S) IS/ARE:</p> <p>_____</p> <p>_____</p> <p>(C) THE BOUNDARIES OF THE PROPOSED NEW DISTRICT(S) ARE AS DESCRIBED IN EXHIBITS _____ INCORPORATED HEREIN.</p>
23	<p>THE PERSON(S) SIGNING THIS PETITION HAVE SIGNED AS: (CHECK ONLY ONE)</p> <p style="text-align: right;"><input type="checkbox"/> REGISTERED VOTERS</p> <p style="text-align: right;"><input type="checkbox"/> OWNERS OF LAND</p>
24	<p>AS REQUIRED, THE FOLLOWING ITEMS ARE ENCLOSED WITH THIS APPLICATION:</p> <p><input checked="" type="checkbox"/> DEPOSIT <input type="checkbox"/> LEGAL DESCRIPTION</p> <p><input checked="" type="checkbox"/> INDEMNIFICATION AGREEMENT <input type="checkbox"/> ANNEXATION MAP (10 COPIES)</p>

LCW
APPLICANT SIGNATURE

9/7/2023
DATE

Please complete the names and addresses of additional persons (not including the owner/applicant previously listed at the beginning of the application) who are requesting to have furnished copies of the agenda and Executive Officer's Report and/or mailed notices of the hearing of this proposal. Please attach additional pages if necessary.

PERSON 1	REQUESTS: <input type="checkbox"/> AGENDA COPIES <input type="checkbox"/> PUBLIC NOTICE OF HEARING <input type="checkbox"/> HEARING PACKAGE HARD COPY <input type="checkbox"/> HEARING PACKAGE ON CD
NAME	COMPANY
MAILING ADDRESS	TELEPHONE NUMBER
CITY, STATE, ZIP	EMAIL ADDRESS

PERSON 2	REQUESTS: <input type="checkbox"/> AGENDA COPIES <input type="checkbox"/> PUBLIC NOTICE OF HEARING <input type="checkbox"/> HEARING PACKAGE HARD COPY <input type="checkbox"/> HEARING PACKAGE ON CD
NAME	COMPANY
MAILING ADDRESS	TELEPHONE NUMBER
CITY, STATE, ZIP	EMAIL ADDRESS

NOTICE:

*Prior to the effective date of any jurisdictional change (i.e., annexation, detachment, etc.) the governing bodies of all agencies whose service areas or service responsibilities would be altered by such change shall meet to determine the amount of property tax revenues to be exchanged between and among such affected agencies. Notwithstanding any other provisions of law, no such jurisdictional change shall become effective until each county and city included in such negotiation agrees, **BY RESOLUTION**, to accept the negotiated exchange of property tax revenues.*

NOTE:

The resolutions referred to above shall be attached to this application prior to filing with the Local Agency Formation Commission. The Executive Officer of the Local Agency Formation Commission shall not issue a Certificate of Completion (COC) until such resolution is filed with LAFCO.

Wherefore, petitioner(s) request(s) that proceedings be taken in accordance with the provisions of Section 56000, et seq. of the Government Code and herewith affix signature(s) as follows:

Chief Petitioners (not to exceed three):

PRINT NAME

DATE

SIGNATURE

RESIDENCE ADDRESS

PRINT NAME

DATE

SIGNATURE

RESIDENCE ADDRESS

PRINT NAME

DATE

SIGNATURE

RESIDENCE ADDRESS

FOR LAFCO USE ONLY

<u>Lois Zinn</u> APPLICATION RECEIVED BY	<u>9/7/2023</u> DATE RECEIVED
CHECK THE DOCUMENTS SUBMITTED WITH THE APPLICATION:	
<input checked="" type="checkbox"/> DEPOSIT \$ 2,000	<input checked="" type="checkbox"/> LEGAL DESCRIPTION
<input checked="" type="checkbox"/> INDEMNIFICATION AGREEMENT	<input type="checkbox"/> ANNEXATION MAP (10 COPIES)
<u>HPUD 2-23</u> PROJECT NO. ASSIGNED	_____ DATE ACCEPTED



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INDEMNIFICATION AGREEMENT

As part of this application, applicant and real party in interest, if different, agree to defend, indemnify, hold harmless, and release the Imperial County Local Agency Formation Commission, its agents, officers, attorneys, and employees (including consultants) from any claim, action, or 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, costs, expenses, attorney fees, or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in connection with the approval of this application, whether or not there is concurrent negligence on the part of the Imperial County Local Agency Formation Commission, its agents, officers, attorneys, or employees (including consultants).

If any claim, action, or proceeding is brought against Imperial County Local Agency Formation Commission, its agents, officers, attorneys, or employees, to attack, set aside, void, or annul the approval of the application or adoption of the environmental document which accompanies it, then the following procedures shall apply:

1. The Executive Officer shall promptly notify the Commission of any claim, action or proceeding brought by an applicant challenging the Commission's action. The Commission, its agents, attorneys, and employees (including consultants) shall fully cooperate in the defense of that action.
2. The Commission shall have final determination on how to best defend the case and may defend it with in-house counsel, or by retaining outside counsel. In either case the applicant shall be fully responsible for all costs incurred. The applicant may request to provide his or her own counsel to defend the case, however prior written approval of the Commission shall be obtained. Said independent counsel shall work with LAFCO counsel to provide a joint defense and shall include a complete defense of LAFCO to the satisfaction of the Commission.

EXECUTED IN Heber ca (CITY), CALIFORNIA ON SEP (MONTH) 7 (DAY) 2023 (YEAR)

APPLICANT	REAL PARTY IN INTEREST / PROPERTY OWNER (IF DIFFERENT FROM APPLICANT)
NAME (PRINT): <u>Jose m Chavez</u>	NAME (PRINT): <u>Sebastian Harvesting</u>
TITLE: <u>Food safety</u>	TITLE: <u>sanitation machine</u>
SIGNATURE: <u>[Signature]</u>	SIGNATURE: <u>[Signature]</u>
MAILING ADDRESS: <u>Sebastian Harvesting Po box</u> <u>66, Soledad ca 93960</u>	MAILING ADDRESS: <u>Sebastian Harvesting Po box</u> <u>66, Soledad ca 93960</u>

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RECEIVED BY: Lori Zinn DATE RECEIVED: 9/7/2023
PROJECT NO. HPUD 2-23