

To be submitted to LAFCo Offices by Cities, Special Districts or San Joaquin County Only

San Joaquin

Local Agency Formation Commission

5000 S. Airport Way, Suite 209, Stockton, Ca 95206

Phone (209) 953-7646

JUSTIFICATION OF PROPOSAL

AII FEES ARE NON-REFUNDABLE

Please complete the following information to process an application under the Cortese-Knox-Hertzberg Local Government Reorganization Act of 2000: (Indicate N/A if Not Applicable)

SHORT TITLE OF THE PROPOSAL: _____

TYPE OF PROPOSAL:

- City Incorporation
- District Consolidation
- MSR Update
- Sphere of Influence Update
- Reorganization (involving an annexation and a detachment)
- Annexation
- District Detachment
- Reconsideration
- Sphere of Influence Amendment
- District Formation
- District Dissolution
- Addition of Services

AGENCY CHANGES RESULTING FROM THIS PROPOSAL

Agency or Agencies gaining territory: _____

Agency or Agencies losing territory: _____

NOTIFICATION

Please indicate the names, addresses and telephone numbers of all Applicants, Applicant's Agents, and all affected Agencies who are to receive the hearing notice and the Executive Officer's Report. Please use a separate sheet of paper if necessary.

Name	Mailing Address	Email Address	Phone Number

PROJECT INFORMATION

Please provide project – related information for the following questions

1. Do the proposed boundaries create an island on non-agency territory? Yes No
2. Do the proposed boundaries split lines of assessment or ownership? Yes No
3. Does the proposal involve public rights-of-way or easements? Yes No
4. Does the proposal involve public land or land assessed by the state? Yes No
5. Does any part of the proposal involve land under a Williamson Act Contract or Farmland Security Zone? Yes No
6. Does any part of the proposal involve land with a Wildlife/Habitat Easement or Agriculture Land Conservation Easement? Yes No
7. List the affected Assessor Parcel Numbers, Owners of record and Parcel Size

APN	Owner	Acreage

8. Physical location of the proposed project: _____
9. Has an application been filed for an underlying project (such as a Development Plan, Conditional Use Permit, or Tentative Subdivision Map)? Yes No
10. List those public services or facilities which will be provided to the affected territory as a result of the proposed action: _____

11. Indicate which of these services or facilities will require main line extensions or facility up-grades in order to service the affected territory _____

12. Provide any other justification that will assist the Commission in reviewing the merits of this request (Attach a separate sheet if necessary) _____

SUBMITTALS REQUIRED FOR APPLICATION PROCESS

In order for this application to be processed, the following information needs to be provided:

One copy of the Justification of Proposal, completed and signed with original signatures;

One copy, 8.5" x 11" or 11" x 17" reduction of the proposal map;

One copy of the metes and bounds description of the affected territory;

The Commission requires that applicable plans and documents submitted for review be signed, sealed and must contain interim notations as required by state law (by a qualified design professional (State Business and Professions Code Sections 5536, 5615 & 6735)).

All mapping documentation (boundary map; metes and bounds legal description; and closure calculations) must meet the State Board of Equalization requirements – for map requirements see application process at sjlafco.org

One copy of the certified copy of the City Council and/or Special District Board Resolution of Application, or a petition making application to LAFCo (as appropriate);

Written permission from each affected property owner (or signature form);

One copy of the project environmental document;

One copy of the project Notice of Determination;

One copy of the Fish and Game Wildlife receipt;

One Copy, 8.5" x 11" copies of the Vicinity Map (if not included on the proposal map);

One copy of the Annexation Plan for providing services along with a schematic diagram of water, sewer and storm drainage systems (refer to Government Code Section 56653);

One copy of the Pre-Zoning map or description (as required by Section 56375);

One copy of the Statement of Open Space (Ag) Land Conversion (refer to Section 56377);

One Copy of the Statement of Timely Availability of Water Supplies (refer to Section 56668(k));

One copy of the Statement of Fair Share Housing Needs (if residential land uses are included in the proposal) (refer to Section 56668(1));

One copy of the project design (site plan, development plan, or subdivision map);

One copy of the Residential Entitlement matrix form (if residential land uses are included in the proposal)

One Copy of the applicant's evaluation of requirements for SB 743

One copy of the Final Environmental Impact Report

Signed San Joaquin Local Agency Formation Commission Indemnification Agreement

Signed Financial Disclosure Agreement

Public Notification Sign for Territorial Boundary Change - please submit a draft copy of the signage for approval. Once application has been accepted, sign must be displayed and submit a photo of posted sign showing location. – for signage requirements see application process at sjlafco.org

City Engagement Process:

- a. What mailings were sent to the community
- b. Did the City receive any comments on the project, if so, what were they
- c. What workshops were held and what topics were discussed.
- d. The minutes from the Planning Commission, City Council Meeting and any Public Hearings and Workshops
- e. Proof of Publication for the appropriate CEQA analysis, public hearings, Planning Commission and City Council

Additional information may be required during staff review

Please submit an electronic copy of the application to our office. Some application documents will be placed on LAFCo Website for public review. To be in compliance with Title II of the ADA please make sure all documents are assessable for everyone.

Filing and processing fees in accordance with the LAFCo Fee Schedule and the State Board of Equalization Fee Schedule.

ALL FEES ARE NON-REFUNDABLE

CERTIFICATION: The undersigned hereby certifies that all LAFCo filing requirements will be met and that the statements made in this application are complete and accurate to the best of their knowledge.

Signature

Title

Print or Type Name

Date

Daytime Telephone Number