

RESOLUTION 2020-027

RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SAN PABLO AUTHORIZING A MAPLE HALL FEE WAIVER IN THE AMOUNT OF \$440 FOR THE SAN PABLO HISTORICAL AND MUSEUM SOCIETY CLUB'S BAY AREA HISTORICAL MEETING ON MONDAY, APRIL 13, 2020

WHEREAS, *Build a Healthy Community*: is an adopted policy item under the FY 2019-21 City Council Priority Workplan, effective March 1, 2019;

WHEREAS, this is not a project as defined by CEQA;

WHEREAS, on February 18, 2020 the City Manager's office received a facility application and fee waiver request from Janet Pottier of the San Pablo Historical and Museum Society;

WHEREAS, the San Pablo Historical and Museum Society will host the Bay Area Historic House Museum Association's quarterly meeting on Monday, April 13, 2020 in Maple Hall;

WHEREAS, during the meeting, the Historical Society will showcase their documentary film about Governor Juan Bautista Alvarado and provide tours of the Alvarado Adobe and Blume House;

WHEREAS, the San Pablo Historical and Museum Society is a 501(c)(3) non-profit organization that is staffed by community volunteers and provides tours of the City's museums while helping educate the community on the City's evolution;

WHEREAS, the San Pablo Historical and Museum Society maintains an archive of historical photos and documents chronicling the history of San Pablo;

WHEREAS, the San Pablo Historical and Museum Society was also a \$10,000 recipient of the FY 2019/20 San Pablo Community Foundation Grant program;

WHEREAS, San Pablo City Council is requested to authorize a fee waiver in the amount of \$440 for the San Pablo Museum and Historical Society to host the quarterly meeting on Monday, April 13, 2020;

WHEREAS, effective August 3, 2015, City Council approved Recreation Division Facility and Field Fees that now requires deposits for facility and field rentals to be paid in full and are no longer eligible for fee waiver; therefore, the San Pablo Museum and Historical Society's initial request to waive \$490 is reduced to \$440; and

WHEREAS, the San Pablo Museum and Historical Society has provided adequate liability insurance associated with the use of the facility.

FEE WAIVER REQUESTED



Rental Agreement #

2589

Facility Rental Application

ONLY SAN PABLO INCORPORATED RESIDENTS ARE ELIGIBLE FOR RESIDENT RATESDate Requested: April 13 2020 Day of Week: Monday Type of Event: Bay Area Historical MeetingSet Up time: 9:00 AM - 10:00 PMEvent time: 10:00 AM - 1:00 PM~~Security Hours: 10:00 AM - 1:00 PM~~Clean-Up time: 1:00 PM - 2:00 PMTotal Hours: 5 (All rental hours must be consecutive)Total Hours of security: 3Name of Applicant: Janet Pottier Phone Number: 510-236-7618Name of Organization: San Pablo Historical and Museum Society State Non-Profit ID#: 09829024Address: 13831 San Pablo Ave. City: San Pablo Zip: 94806Phone: 510-255-7488 Email: sanpablomuseums@gmail.comDesignated Person In Charge on the Day of Event: Janet Pottier Phone: 510-236-7618**Facility Requested (Maximum capacity):**

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Maple Hall (new) (145) | <input type="checkbox"/> Davis Park Multi-Purpose (80) | <input type="checkbox"/> Madeira Room (45) |
| <input type="checkbox"/> Church Lane Senior Center (139) | <input type="checkbox"/> Davis Park Senior Center (50) | <input type="checkbox"/> Activity Room 2 (41) |
| <input type="checkbox"/> Library Community Room (105) | <input type="checkbox"/> Community Room A or B (48) | <input type="checkbox"/> Computer Lab (20) |
| <input type="checkbox"/> San Pablo Community Hall (96) | <input type="checkbox"/> Teen Lounge (47) | <input type="checkbox"/> Commercial Kitchen (2) |

Write the number of participants for each age group; the attendance numbers should be as accurate as possible.Total Attendance: 40 Children (ages 1-12) 0 Teens (13-20) 0 Adults (21-35) 5 Adults (35+) 35Will alcoholic beverages be served? ☐ YES* / ☒ NO For Sale? ☐ YES* / ☒ NO

* If "YES" see page 9 of Rental Policy

Photo I.D Required:Type: Drivers license Number: U0046714

OFFICE USE ONLY	
Application Fee (Non-Refundable)	\$ <u>15.00</u>
Deposit	\$ <u>50.00</u>
Hourly Fee	\$ <u>350.00</u>
Insurance Fee (Will organization/applicant provide their own Insurance?) <u>yes</u>	\$ <u>1250.00</u>
Alcohol Fee	\$ <u>200.00</u>
Staff Fees (\$20/person/hour) <u>(2 staff) (5 hrs.)</u>	\$ <u>75.00</u>
Security Guards	\$ <u>640.00</u>
Equipment	\$ <u>150.00</u>
Amount Total	\$ <u>1540.00</u>

Recreation Staff Signature:

Date Received: 11/12/19Approved ☒Denied ☐By: Megan D.

CM Staff Signature:

Date Received: _____

Approved ☐Denied ☐

By: _____

FEE WAIVER REQUESTED

Staff: Negan KD

RECEIVED
FEB 18 2020
CITY MANAGER/CITY CLERK
City of San Pablo

FACILITY APPLICATION TRACKING SHEET

(Leave yellow for coordinator)

Type of Event: Bay Area Historical Meeting

Permit #: 2589

Applicant/Organization Name: Janet Potter

Event Date: April 13th, 2020

Non-Profit Status Confirmed?

☒ (check on <http://kepler.sos.ca.gov/>)

Signed Policy Page (pg. 12)?



Waiver Requested? Yes No

Council Agenda Date: _____

RESO #: _____

Letter to CM

Included? ☐

Due: _____

OFFICE CHECK LIST

Remaining balance \$ 625.00 Balance due date (30 days before rental): 3/13/19

Amount paid: \$ 65.00 Date paid: 11/12/19 Remaining balance: \$ _____

Amount paid: \$ _____ Date paid: ____/____/____ Remaining balance: \$ _____

City providing liability insurance (leave blank if not sure)?

Yes

No

If no, liability insurance certificate was provided on ____/____/____

If yes, liability insurance certificate was written on ____/____/____

*Security Guards required? YES/NO

Date Guards Requested: N/A

*If Yes, # of Guards Required: N/A

Layout/Diagram Included? YES/NO

Date Layout/Diagram Needed by: April 1, 2020

AV Equipment Requested? YES/NO

Desired Equipment: April 13th, 2020

Alcohol Requested

YES/NO

*Background Questionnaire Included:

YES/NO

*If yes, letter to Chief included (due now)?

Have you made a copy of applicant ID?

YES/NO

Date request was emailed to PD: N/A

PD Permit Received: N/A

NOTES: Paid Deposit & App Fee - 11/12/19 Megan KD

Janet came to drop off letter for fee waiver 2/7/20 - JP

spoke to Janet on 2/12/20 to let her know about staff fees / insurance - JP

Refund? Full Partial None Requested on: ____/____/____

AGREEMENT AND ACCEPTANCE OF APPLICATIONS

In signing this application, I certify that I have received the Public Facility Rental Policies. I have read and understood the facility rules and instructions, and I (or organization represented) will abide by any conditions set forth therein. I agree to hold the City of San Pablo, the individual members thereof, and all of its officers, agents and employees, free and harmless from any loss, damage, cost of expense that may arise during or caused in any way by such use or occupancy of recreational facilities.

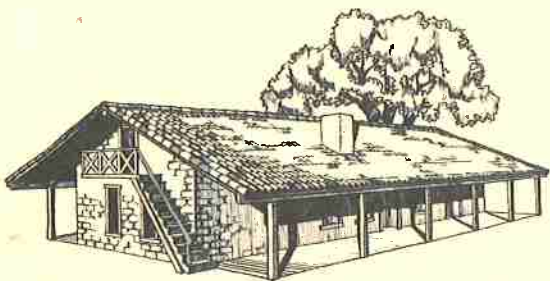
I accept full responsibility for them throughout the period specified in the Facility Rental Application. I further understand that as the applicant I assume full responsibility for any penalty fees assessed by the City of San Pablo for any violations of these rules and regulations governing the use of the above requested facility. I am also aware that by signing this contract, I take full responsibility for the behavior exhibited by my guests during my rental.

I understand that I (or organization represented) am responsible for any damages or fees sustained to the buildings, furniture or equipment through occupancy. Responsibility includes but is not limited to third party fines issued as a result of not following facility rental policies. Any lost equipment or damages sustained must be compensated within seven days of event date.

Name of Applicant (please print): Janet Pottier

Signature of Applicant:  Date: 11/12/2019

Organization Name (if applicable): San Pablo Historical & Museum Society



alvarado adobe

SAN PABLO

Historical and Museum Society

number 1 alvarado square, san pablo, california 94806

The San Pablo Historical and Museum Society, a 501(c)(3) nonprofit organization, has rented Maple Hall on Monday, April 13 from 9:00 am until 2:00 pm. We will be hosting a meeting of the Bay Area Historic House Museum Association (BAHHM). We are a member of this organization and it is our turn to host the quarterly business meeting, which includes providing breakfast and lunch. We will be showing our recently completed documentary film about Governor Alvarado and touring the Alvarado Adobe and Blume House.

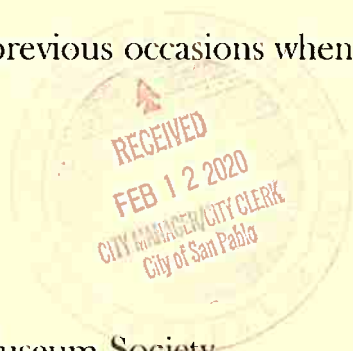
We are requesting a fee waiver of the facility rental of \$350.00, the AV equipment rental of \$75.00, the deposit of \$50.00 and the application fee of \$15.00 for a total of \$490.00. We have our own insurance so that amount is not included in the total.

The City has waived this fee on previous occasions when we have hosted the BAHHM Association meetings.

Sincerely,

Janet Pottier

The San Pablo Historical and Museum Society



GENE
COMINA
BY
2-12-20



State of California Secretary of State

N

Statement of Information

(Domestic Nonprofit, Credit Union and General Cooperative Corporations)

Filing Fee: \$20.00. If this is an amendment, see instructions.
IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

FY16802**FILED**

In the office of the Secretary of State
of the State of California

JUL-23 2018**1. CORPORATE NAME**

SAN PABLO HISTORICAL AND MUSEUM SOCIETY

2. CALIFORNIA CORPORATE NUMBER

C0982024

This Space for Filing Use Only

Complete Principal Office Address (Do not abbreviate the name of the city. Item 3 cannot be a P.O. Box.)**3. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY**

CITY

STATE

ZIP CODE

13831 SAN PABLO AVENUE, SAN PABLO, CA 94806

4. MAILING ADDRESS OF THE CORPORATION

CITY

STATE

ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)**5. CHIEF EXECUTIVE OFFICER/**

ADDRESS

CITY

STATE

ZIP CODE

JANET POTTIER 1529 EMERIC AVENUE4, SAN PABLO, CA 94806

6. SECRETARY

ADDRESS

CITY

STATE

ZIP CODE

RACHEL CABRAL -HEALY 667 40TH STREET, RICHMOND, CA 94805

7. CHIEF FINANCIAL OFFICER/

ADDRESS

CITY

STATE

ZIP CODE

AUDREY LASSON 13956 SAN PABLO AVE APT 100, SAN PABLO, CA 94806

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 9 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 9 must be left blank.**8. NAME OF AGENT FOR SERVICE OF PROCESS** [Note: The person designated as the corporation's agent MUST have agreed to act in that capacity prior to the designation.]

JANET POTTIER

9. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

CITY

STATE

ZIP CODE

13831 SAN PABLO AVE, SAN PABLO, CA 94806

Common Interest Developments

10. ☐ Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act, (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act, (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). Please see instructions on the reverse side of this form.

11. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

07/23/2018

JANET POTTIER

BOARD PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

NOW, THEREFORE, BE IT RESOLVED that the City Council of the City of San Pablo authorizes the fee waiver in the amount of \$440 for the San Pablo Historical and Museum Society to host the Bay Area Historic House Museum Association's quarterly meeting on Monday, April 13, 2020.

BE IT FURTHER RESOLVED that a total of \$15,000 has been budgeted and earmarked for Maple Hall Fee Waivers under the adopted FY 2018-21 Quadrennial Operating Budget - City Council Department (100-1110-44050). The authorized fee waiver in the amount of \$440 will be deducted from this account leaving a remaining balance of \$14,560 for the remainder of the FY 2019/20 period for future waiver and sponsorship authorizations by Council.

Item	Rate/hour	# of hour	Cost
Application Fee	Flat fee		\$ 15 *
Rental Fee	(Base Fee)		\$350*
Alcohol Fee	Flat fee		\$0
Add'l Personnel	Flat Fee		\$200
Liability Insurance	Flat fee (provided by San Pablo Museum/Historical Society)		\$0
PA Equipment Fee	Flat fee		\$75*
Security Deposit			\$50
Total Amount Waived			\$440

* * * * *

ADOPTED this 2nd day of March 2020, by the following votes:

AYES:	COUNCILMEMBERS:	Kinney, Pineda, Xavier, Pabon-Alvarado and Cruz
NOES:	COUNCILMEMBERS:	None
ABSENT:	COUNCILMEMBERS:	None
ABSTAIN:	COUNCILMEMBERS:	None

ATTEST:	APPROVED:
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/s/ Patricia Ponce
Patricia Ponce, City Clerk

/s/ Arturo M. Cruz
Arturo M. Cruz, Mayor