

EXHIBIT A

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 Redevelopment Agency of City of Imperial	COMPANY City of Imperial
MAILING ADDRESS 420 Imperial Avenue, Imperial CA 92251	TELEPHONE NUMBER 760-355-3326
CITY, STATE, ZIP Imperial, CA 92251	EMAIL ADDRESS
APPLICANT INFORMATION (IF DIFFERENT FROM THE OWNER)	
NAME City of Imperial/Marlene D. Best	COMPANY City of Imperial
MAILING ADDRESS 420 South Imperial Avenue	TELEPHONE NUMBER (760) 355-4373
CITY, STATE, ZIP Imperial, CA 92251	EMAIL ADDRESS mbest@cityofimperial.org
PROJECT INFORMATION	
NAME OF PROPOSAL Regional Park and Equestrian Center	DATE 01/08/2015
PROJECT ADDRESS South West Corner of Larsen and La Brucherie Blvd	APN(S) 063-010-049
CITY, STATE, ZIP Imperial, CA 92251	TOTAL LAND AREA (ACRES) 143.52
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 checked="" type="checkbox"/> ANNEXATION <input type="checkbox"/> SPHERE OF INFLUENCE <input type="checkbox"/> OTHER <input type="checkbox"/> DETACHMENT <input type="checkbox"/> CONSOLIDATION <input type="checkbox"/> EXTENSION OF SERVICES <input type="checkbox"/> INCORPORATION <input type="checkbox"/> FORMATION OF _____
2	NAME OF THE CITY/SPECIAL DISTRICT BEING AFFECTED City of Imperial
3	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. <input checked="" type="checkbox"/> YES, BOUNDARY EXHIBITS ARE ATTACHED

14	WHAT IS THE PLANNED GENERAL PLAN DESIGNATION OF THE AREA BY THE AFFECTED CITY? Public Use <hr/> <hr/>
15	DESCRIBE ANY SPECIAL LAND USE CONCERNS EXPRESSED IN THE ABOVE PLANS. None <hr/> <hr/>
16	SPECIFY ANY AND ALL EXISTING LAND USES. <u>Agricultural</u> <hr/> WHAT ARE THE PROPOSED LAND USES? <u>Open Space (OS)</u> DESCRIBE YOUR PROJECT IN DETAIL. <u>See attachment-Exhibit B</u> <hr/> <hr/>
17	DOES THE APPLICATION CONTAIN 100% WRITTEN CONSENT OF EACH PROPERTY OWNER IN THE SUBJECT TERRITORY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
18	WILL THE ANNEXED TERRITORY BE LIABLE FOR ITS SHARE OF EXISTING BONDED INDEBTEDNESS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
19	WILL THE ANNEXED TERRITORY BE INCLUDED WITHIN ANY PARTICULAR TAX DIVISION OR ZONE OF THE ANNEXING TERRITORY? PLEASE SPECIFY. <u>Subject to its own tax agreement that is currently being negotiated.</u> <hr/> <hr/>
20	IF THE PROPOSAL INCLUDES THE CONSOLIDATION OF SPECIAL DISTRICTS, THE PROPOSED NAME OF THE CONSOLIDATED DISTRICT IS: <u>N/A</u> <hr/> <hr/>
21	IF AN INCORPORATION IS INCLUDED IN THE PROPOSAL: (A) THE NAME PROPOSED FOR THE NEW CITY IS: <u>N/A</u> (B) PROVISIONS ARE REQUESTED FOR APPOINTMENT OF: (i) CITY MANAGER <input type="checkbox"/> YES <input type="checkbox"/> NO (ii) THE CITY CLERK AND CITY TREASURER <input type="checkbox"/> YES <input type="checkbox"/> NO

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: <u>N/A</u></p> <p>(B) THE PROPOSED NAME(S) OF THE NEW DISTRICT(S) IS/ARE: <u>N/A</u></p> <p>(C) THE BOUNDARIES OF THE PROPOSED NEW DISTRICT(S) ARE AS DESCRIBED IN EXHIBITS <u>N/A</u> INCORPORATED HEREIN.</p>
23	<p>THE PERSON(S) SIGNING THIS PETITION HAVE SIGNED AS:</p> <p style="text-align: right;"><i>(CHECK ONLY ONE)</i></p> <p style="text-align: right;"><input type="checkbox"/> REGISTERED VOTERS</p> <p style="text-align: right;"><input checked="" 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 checked="" type="checkbox"/> LEGAL DESCRIPTION</p> <p><input checked="" type="checkbox"/> INDEMNIFICATION AGREEMENT <input checked="" type="checkbox"/> ANNEXATION MAP (10 COPIES)</p>

Mark D. Best
 APPLICANT SIGNATURE

January 8, 2015
 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

Julie Carter
APPLICATION RECEIVED BY

1-09-15
DATE RECEIVED

CHECK THE DOCUMENTS SUBMITTED WITH THE APPLICATION:

- | | |
|---|--|
| <input checked="" type="checkbox"/> DEPOSIT | <input checked="" type="checkbox"/> LEGAL DESCRIPTION |
| <input checked="" type="checkbox"/> INDEMNIFICATION AGREEMENT | <input checked="" type="checkbox"/> ANNEXATION MAP (10 COPIES) |

1m1-16
PROJECT NO. ASSIGNED

02/10/15
DATE ACCEPTED DS