

EXHIBIT A

APPLICATION

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

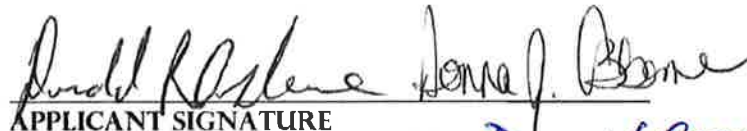
The undersigned hereby petition(s) the Local Agency Formation Commission of Imperial County for approval of a proposed change of organization, and stipulate(s) as follows:

OWNER INFORMATION	
NAME Don and Donna Osborne	COMPANY
MAILING ADDRESS 251 Maple Avenue	TELEPHONE NUMBER 760-960-5962
CITY, STATE, ZIP Holtville, CA 92256	EMAIL ADDRESS dosborne@hblp.com
APPLICANT INFORMATION (IF DIFFERENT FROM THE OWNER)	
NAME	COMPANY
MAILING ADDRESS	TELEPHONE NUMBER
CITY, STATE, ZIP	EMAIL ADDRESS
PROJECT INFORMATION	
NAME OF PROPOSAL Holtville Annexation ^{3rd} 1st 15	DATE October 28, 2015
PROJECT ADDRESS 251 Maple Avenue	APN(S) 045-330-071 and 045-340-029
CITY, STATE, ZIP Holtville, CA 92256	TOTAL LAND AREA (ACRES) 1.00 ac (detachment) and 0.25 ac (annexation)
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: <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> ANNEXATION <input checked="" type="checkbox"/> DETACHMENT <input type="checkbox"/> INCORPORATION </div> <div> <input type="checkbox"/> SPHERE OF INFLUENCE <input type="checkbox"/> CONSOLIDATION <input type="checkbox"/> FORMATION OF _____ </div> <div> <input type="checkbox"/> OTHER <input type="checkbox"/> EXTENSION OF SERVICES </div> </div>
2	NAME OF THE CITY/SPECIAL DISTRICT BEING AFFECTED City of Holtville
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

4	PLEASE LIST ANY OTHER DOCUMENTS BEING SUBMITTED WITH THE APPLICATION (EXCEPT THOSE ALREADY REQUIRED BY LAFCO).	
5	THE TERRITORY(IES) INCLUDED IN THE PROPOSAL IS/ARE:	<input checked="" type="checkbox"/> UNINHABITED <input type="checkbox"/> INHABITED (12 OR MORE REGISTERED VOTERS)
6	CURRENTLY, THE TERRITORY(IES) INCLUDED IN THE PROPOSAL IS/ARE:	<input checked="" type="checkbox"/> DEVELOPED <input type="checkbox"/> UNDEVELOPED
7	IS THIS PROPOSAL CONSISTENT WITH THE SPHERE OF INFLUENCE OF THE AFFECTED CITY AND/OR DISTRICT?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
8	PLEASE DESCRIBE IN DETAIL, THE REASONS FOR THE PROPOSED CHANGE OF ORGANIZATION (ANNEXATION, DETACHMENT, ETC.). USE ATTACHED SHEET IF NECESSARY. The annexation will allow 0.25 acres to be added to an existing parcel of land in the City of Holtville. The detachment will allow an existing parcel with portions in City and County to be entirely within the County.	
9	THE PROPOSED CHANGE OF ORGANIZATION IS REQUESTED, SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:	
10	WOULD THIS PROPOSAL CREATE AN ISLAND OF UNINCORPORATED TERRITORY? IF YES, PLEASE EXPLAIN.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
11	IS THERE A GOOD LIKELIHOOD OF A SIGNIFICANT INCREASE IN POPULATION IN THE SUBJECT AREA WITHIN THE NEXT TEN YEARS? IN UNINCORPORATED AREAS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IN INCORPORATED AREAS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO ESTIMATED ADDITIONAL POPULATION: _____	
12	WHAT IS THE EXISTING ZONING? <u>M1-NU</u> WHAT IS THE PROPOSED ZONING? <u>M1-NU</u>	
13	HAS OR IS THE AREA BEEN/BEING PRE-ZONED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO WHAT IS THE PRE-ZONING CLASSIFICATION? _____ WHAT DATE WAS THIS PRE-ZONED? _____	

14	WHAT IS THE PLANNED GENERAL PLAN DESIGNATION OF THE AREA BY THE AFFECTED CITY? Light manufacturing			
15	DESCRIBE ANY SPECIAL LAND USE CONCERNS EXPRESSED IN THE ABOVE PLANS.			
16	SPECIFY ANY AND ALL EXISTING LAND USES. Farm labor shop and yard			
	WHAT ARE THE PROPOSED LAND USES? Farm labor shop and yard			
	DESCRIBE YOUR PROJECT IN DETAIL:			
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 checked="" type="checkbox"/>	YES	
		<input type="checkbox"/>	NO	
19	WILL THE ANNEXED TERRITORY BE INCLUDED WITHIN ANY PARTICULAR TAX DIVISION OR ZONE OF THE ANNEXING TERRITORY? PLEASE SPECIFY. N/A			
20	IF THE PROPOSAL INCLUDES THE CONSOLIDATION OF SPECIAL DISTRICTS, THE PROPOSED NAME OF THE CONSOLIDATED DISTRICT IS: N/A			
21	IF AN INCORPORATION IS INCLUDED IN THE PROPOSAL:			
	(A)	THE NAME PROPOSED FOR THE NEW CITY IS: N/A		
	(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: N/A</p> <p>(B) THE PROPOSED NAME(S) OF THE NEW DISTRICT(S) IS/ARE:</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><input type="checkbox"/> REGISTERED VOTERS</p> <p><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>


 APPLICANT SIGNATURE NOVEMBER 2, 2015
 DONALD R. OSBORNE AND DONNA J. OSBORNE 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



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 applicant shall be fully responsible for all costs incurred. 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 EL CENTRO, CALIFORNIA ON NOVEMBER 2, 2015
(CITY) (MONTH) (DAY) (YEAR)

APPLICANT

NAME (PRINT): DONALD R. OSBORNE
DONNA J. OSBORNE

TITLE: OWNERS

SIGNATURE: [Signature]

MAILING ADDRESS:

251 WALNUT AVE.
HOLTVILLE, CA 92250

REAL PARTY IN INTEREST / PROPERTY OWNER (IF DIFFERENT FROM APPLICANT)

NAME (PRINT): _____

TITLE: _____

SIGNATURE: _____

MAILING ADDRESS:

FOR LAFCO USE ONLY

RECEIVED BY: _____

DATE RECEIVED: _____

PROJECT NO. _____

J:\DEBIS\LAFCO\Forms\2014 Forms\Indemnification Agreement.doc Updated 06/30/2014