

EXHIBIT A

RECEIVED

OCT 13 2015

Imperial County
LOCAL AGENCY FORMATION COMMISSION

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 Justo felix	COMPANY T.O. Transport Corp									
MAILING ADDRESS 253 W Horne Rd.	TELEPHONE NUMBER 760-600-4083									
CITY, STATE, ZIP EL CENTRO CA - 92243	EMAIL ADDRESS TO Transport Corp @ Gm. l.com									
APPLICANT INFORMATION (IF DIFFERENT FROM THE OWNER)										
NAME Same	COMPANY									
MAILING ADDRESS	TELEPHONE NUMBER									
CITY, STATE, ZIP	EMAIL ADDRESS									
PROJECT INFORMATION										
NAME OF PROPOSAL T.O. Transport Yard	DATE 10/12/15									
PROJECT ADDRESS 2475 Clark Road	APN(S) 0000056405									
CITY, STATE, ZIP Imperial CA. 92243	TOTAL LAND AREA (ACRES) 044,200,081									
<p>THIS PROPOSAL IS MADE PURSUANT TO CALIFORNIA GOVERNMENT CODE (COMMENCING WITH SECTION 56000, CORTESE KNOX HERTZBERG LOCAL GOVERNMENT REORGANIZATION ACT OF 2000).</p>										
1	<p>PROPOSED CHANGES OF ORGANIZATION:</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> ANNEXATION</td> <td><input type="checkbox"/> SPHERE OF INFLUENCE</td> <td><input type="checkbox"/> OTHER</td> </tr> <tr> <td><input type="checkbox"/> DETACHMENT</td> <td><input type="checkbox"/> CONSOLIDATION</td> <td><input type="checkbox"/> EXTENSION OF SERVICES</td> </tr> <tr> <td><input type="checkbox"/> INCORPORATION</td> <td><input type="checkbox"/> FORMATION OF _____</td> <td></td> </tr> </table>	<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 _____	
<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 Imperial CA.									
3	<p>THE PROPOSED BOUNDARIES OF THE TERRITORY/IES INCLUDED IN THE PROPOSAL ARE AS DESCRIBED IN THE EXHIBITS ATTACHED HERETO AND BY THIS REFERENCE INCORPORATED HEREIN</p> <p><input checked="" type="checkbox"/> YES, BOUNDARY EXHIBITS ARE ATTACHED</p>									

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4	PLEASE LIST ANY OTHER DOCUMENTS BEING SUBMITTED WITH THE APPLICATION (EXCEPT THOSE ALREADY REQUIRED BY LATCO): <u>map.</u>	
5	THE TERRITORY(IES) INCLUDED IN THE PROPOSAL IS(ARE): <input checked="" type="checkbox"/> UNINHABITED <input type="checkbox"/> INHABITED (IF OR HOW, SEE Q13 & Q18)	
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. <u>City of Imperial eazyier for permits & to develop new grounds.</u>	
9	THE PROPOSED CHANGE OF ORGANIZATION IS REQUESTED SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS: <u>N/A</u>	
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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO IN INCORPORATED AREAS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO ESTIMATED ADDITIONAL POPULATION: <u>0</u>	
12	WHAT IS THE EXISTING ZONING? <u>Industrial</u> WHAT IS THE PROPOSED ZONING? <u>Same.</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? <u>N/A</u> WHAT DATE WAS THIS PRE ZONED? <u>N/A</u>	

14	WHAT IS THE PLANNED GENERAL PLAN DESIGNATION OF THE AREA BY THE AFFECTED CITY? <u>INDUSTRIAL</u>			
15	DESCRIBE ANY SPECIAL LAND USE CONCERNS EXPRESSED IN THE ABOVE PLANS <u>N/A</u>			
16	SPECIFY ANY AND ALL EXISTING LAND USES <u>INDUSTRIAL</u> WHAT ARE THE PROPOSED LAND USES? <u>truck yard</u> 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. _____			
20	IF THE PROPOSAL INCLUDES THE CONSOLIDATION OF SPECIAL DISTRICTS, THE PROPOSED NAME OF THE CONSOLIDATED DISTRICT IS <u>N/A</u>			
21	IF AN INCORPORATION IS INCLUDED IN THE PROPOSAL: (A) THE NAME PROPOSED FOR THE NEW CITY IS _____ (B) PROVISIONS ARE REQUESTED FOR APPOINTMENT OF: (C) CITY MANAGER <input type="checkbox"/> YES <input type="checkbox"/> NO (D) THE CITY CLERK AND CITY TREASURER <input type="checkbox"/> YES <input type="checkbox"/> NO			

22	IF THE CREATION OF A NEW DISTRICT(S) IS INCLUDED IN THE PROPOSAL: (A) THE PRINCIPAL AGENTS UNDER WHICH SAID DISTRICT(S) IS/ARE PROPOSED TO BE FORMED IS/ARE: _____ _____ (B) THE PROPOSED NAME(S) OF THE NEW DISTRICT(S) IS/ARE: _____ _____ (C) THE BOUNDARIES OF THE PROPOSED NEW DISTRICT(S) AS AS DESCRIBED IN EXHIBITS _____, INCORPORATED HEREIN.
23	THE PERSON(S) SIGNING THIS APPLICATION HAVE SIGNED AS: <input type="checkbox"/> CHECK ONLY ONE! <input type="checkbox"/> REGISTERED VOTERS <input checked="" type="checkbox"/> OWNERS OF LAND
24	AS REQUIRED, THE FOLLOWING ITEMS ARE ENCLOSED WITH THIS APPLICATION: <input checked="" type="checkbox"/> DEPOSIT <input checked="" type="checkbox"/> INDEMNIFICATION AGREEMENT <input checked="" type="checkbox"/> LEGAL DESCRIPTION <input checked="" type="checkbox"/> ANNEXATION MAP (10 COPIES) 76-21-116 - not received


 APPLICANT SIGNATURE

76-13-15
 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"/> HEARING PACKAGE (HAND COPY)	<input type="checkbox"/> PUBLIC NOTICE OF HEARING <input type="checkbox"/> HEARING PACKAGE (MAIL)
NAME	COMPANY		
MAILING ADDRESS	TELEPHONE NUMBER		
CITY/STATE/ZIP	E-MAIL ADDRESS		
PERSON 2	REQUESTS	<input type="checkbox"/> AGENDA COPIES <input type="checkbox"/> HEARING PACKAGE (HAND COPY)	<input type="checkbox"/> PUBLIC NOTICE OF HEARING <input type="checkbox"/> HEARING PACKAGE (MAIL)
NAME	COMPANY		
MAILING ADDRESS	TELEPHONE NUMBER		
CITY/STATE/ZIP	E-MAIL 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):

Justo Felix
PRINT NAME
SIGNATURE

10/9/15
DATE

253 West Horne rd el centro ca
RESIDENCE ADDRESS 92243

Gisel C Felix
PRINT NAME
SIGNATURE

10/9/15
DATE

253 West Horne rd el centro ca
RESIDENCE ADDRESS 92243

PRINT NAME

DATE

SIGNATURE

RESIDENCE 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 Imperial CALIFORNIA ON October 13, 2015
(CITY) (MONTH) (DAY) (YEAR)

APPLICANT

NAME (PRINT): Justo P Felia

TITLE: Owner

SIGNATURE: [Signature]

MAILING ADDRESS:

253 west Horne rd
el centro ca 92243

REAL PARTY IN INTEREST / PROPERTY OWNER

(IF DIFFERENT FROM APPLICANT)

NAME (PRINT): Justo P Felia

TITLE: Owner

SIGNATURE: [Signature]

MAILING ADDRESS:

253 west Horne rd
el centro ca.

FOR LAFCO USE ONLY

RECEIVED BY: Paula D. [Signature]

DATE RECEIVED: 10.13.15

PROJECT NO. IM 3.15 0

JH:DEBS\LAFCO\Frms\2014\Frms\Indemnification Agreement.doc Updated 06/30/2014