

AGENDA TRANSMITTAL FORM

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
10/13/15	

To: Board of Supervisors
 Date: 9/29/15

Top Matters

From: James Rooney
 (Department Head - please type)

Phone Ext. 454

Department Head Signature *James Rooney*

Agenda Title: SECURED ROLL CORRECTIONS

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
 REQUEST FOR APPROVAL OF ROLL CORRECTIONS WHICH EXCEED 50% OF THE ORIGINAL VALUE OR A DECREASE OF \$150,000 OR MORE. APN 011-310-004-000 & 023-020-057-000.

Recommendation/Requested Action:

APPROVE

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required? Yes No

Committee Review? N/A

Name _____

Committee Recommendation: _____

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Comments: _____

Request Reviewed by:

Chairman *B* Counsel *CB*
 Auditor *JCR* GSA Director *Hop*
 CAO *[Signature]* Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Assessor; Auditor _____

FOR CLERK USE ONLY

Meeting Date October 13, 2015 Time 9 a.m. Item # 2A

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____	A new ATF is required from _____ Department _____	I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
Completed by _____	For meeting of _____	ATTEST: _____ Clerk or Deputy Board Clerk

County of AMADOR
ASSESSOR ROLL CORRECTION

Asmt: 011-310-004-000 Tax Year: 2015 R/C #: A0296 Roll Type: S Fee Parcel: 011-310-004-000 Originating Asmt: 011-310-004-000 From TRA: 052-037 New TRA: 052-037

R&T 1: 51 R&T 2: Value History: Y Taxability Code: Taxroll Asmt Only: N

Roll Value	New Value	Sup From Net	Sup To Net	Suppl Change
Land	633,887			
Structure	284,156			
Growing				
PP MH				
Fixtures R/P				
Fixtures				
Personal Property				
HOX				
Other Exemptions				
Net Change				-460,543

Owner: WRIGHT EDWARD J JR & DORTHE M
Mailing Address: C/O MARTENSEN WRIGHT PC
1 CAPITOL MALL STE 670
SACRAMENTO CA 95814-3265

Supl Info

10 % PP Penalty: N
Restricted: N
Timber Preserve: N
5151 Interest: N
506 Interest: N

Event From/Thru Dates: [] []
Ownership From/Thru Dates: [] []

506/5151 From/Thru Dates: From 1 [] Thru []
From 2 []

TaxBill Days: []
R/C Date: Sep 23, 2015
Created By: TM

Print R/C Wks: C
Print R/C Letter: C
R/C Completed: C

Appraiser: [] [] []
Supv Appr: [] [] []
Chief Appr: [] [] []

Asmt Clerk: [] [] []
Off Mgr: [] [] []

Situs: 10800 BEAVER LOOP

Bill Comments: PROP 8 ADJUSTMENT

Assessor: [Signature] Date: 9/23/15
Auditor: [Signature] Date: 9/23/15
County Counsel: [Signature] Date: 9/30/15

County of AMADOR
ASSESSOR ROLL CORRECTION

Asmt: 023-020-057-000 Tax Year: 2015 R/C #: A0301 Roll Type: S Fee Parcel: 023-020-057-000 Originating Asmt: 023-020-057-000 From TRA: 052-086 New TRA: 052-086

R&T 1: 4831 R&T 2: Value History: Y Taxability Code: Taxroll Asmt Only: N

Roll Value	New Value	Sup From Net	Sup To Net
Land	579,144		
Structure	140,483		
Growing			
PP MH			
Fixtures R/P			
Fixtures			
Personal Property			
HOX			
Other Exemptions			
Net Change			
Supl Change			

Owner: BERGER KEVIN & SUZANNA
Mailing Address: 701 E CANAL DR, TURLOCK CA 95380

Supl Info: 506/5151 From/Thru Dates: From 1 [] Thru []

Event From/Thru Dates: [] []

Ownership From/Thru Dates: [] []

10 % PP Penalty: N
Restricted: Y
Timber Preserve: N
5151 Interest: N
506 Interest: N

TaxBill Days: []
R/C Date: Sep 24, 2015
Created By: TM

Print R/C Wks: C
Print R/C Letter: C
R/C Completed: C

Situs: 18702 WILDBERRY LN

Bill Comments: TO CORRECT RESTRICTED LAND & BARN VALUES FOR 2015/16

Appraiser: [] [] []
Supv Appr: [] [] []
Chief Appr: [] [] []

Asmt Clerk: [] [] []
Off Mgr: [] [] []

Assessor Signature: [Signature] Date: 9/24/15
Auditor Signature: [Signature] Date: [] [] []
County Counsel Signature: [Signature] Date: 9/30/15

AGENDA TRANSMITTAL FORM

Resol

To: **Board of Supervisors**

Date: 09/25/2015

From: Michael E. Ryan, Treasurer/Tax Collector
(Department Head - please type)

Phone Ext. X443

Department Head Signature *ME.R*

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
<u>Oct. 13, 2015</u>	

Agenda Title: Resolution Authorizing Sale of Tax-Defaulted Property at Public Auction

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Request by Treasurer/Tax Collector to sell tax-defaulted property at public auction for non-payment of secured property taxes, pursuant to State Law (Section 3691, et seq., Revenue and Taxation Code).

Recommendation/Requested Action:
Adoption of the proposed Resolution

Fiscal Impacts (attach budget transfer form if appropriate)

None

Staffing Impacts

None

Is a 4/5ths vote required?

Yes

No

Contract Attached: Yes No N/A

Resolution Attached: Yes No N/A

Ordinance Attached: Yes No N/A

Comments: _____

Committee Review?

N/A

Name _____

Committee Recommendation: _____

Request Reviewed by:

Chairman *[Signature]*

Counsel *GG*

Auditor *[Signature]*

GSA Director *Hop*

CAO *[Signature]*

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Certified copies of both the Request for Approval and the Resolution to Treasurer/Tax Collector ; Auditor

FOR CLERK USE ONLY

Meeting Date October 13, 2015

Time 9 a.m.

Item # 3A

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____

A new ATF is required from _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Completed by _____

Department _____

ATTEST: _____

For meeting _____

Clerk or Deputy Board Clerk

of _____

Save

Print Form

**BEFORE THE BOARD OF SUPERVISORS OF THE
COUNTY OF AMADOR, STATE OF CALIFORNIA**

IN THE MATTER OF:

RESOLUTION AUTHORIZING SALE)	RESOLUTION NO. 15-XXX
OF TAX-DEFAULTED PROPERTY)	
AT PUBLIC AUCTION)	

BE IT RESOLVED by the Board of Supervisors of the County of Amador, State of California, that said Board does hereby approve the sale of tax-defaulted property at public auction, for the stated minimum price, as outlined on the attachment(s) hereto, in accordance with Chapter 7 of Part 6 of Division 1 of the California Revenue and Taxation Code. Said Board does further approve the re-offer of unsold parcels at a price which the Tax Collector deems appropriate, pursuant to Section 3698.5, Revenue and Taxation Code.

The foregoing Resolution was duly passed and adopted by the Board of Supervisors of the County of Amador at a regular meeting thereof, held on the 13th day of October, 2015, by the following vote:

AYES:

NOES:

ABSENT:

Chairman, Board of Supervisors

ATTEST:

JENNIFER BURNS, Clerk of the
Board of Supervisors, Amador County,
California

Deputy

AMADOR COUNTY TREASURER - TAX COLLECTOR

810 COURT STREET, JACKSON, CA 95642-2132
MICHAEL E. RYAN, TREASURER-TAX COLLECTOR

TELEPHONE : (209)223-6364
FAX: (209)223-6251



REQUEST FOR APPROVAL TO SELL TAX-DEFAULTED PROPERTY
SUBJECT TO THE POWER TO SELL

To the Honorable Board of Supervisors
County of Amador, State of California

Your approval to sell at public auction, for the stated minimum price, the tax-defaulted property which is subject to the power of sale and described on the attached schedule, in accordance with Chapter 7 of Part 6 of Division 1 of the California Revenue and Taxation Code, is respectfully requested. It is my intention, with your approval, to re-offer unsold parcels at a price which I deem appropriate, pursuant to Section 3698.5, Revenue and Taxation Code.

Date: SEPTEMBER 25, 2015

MICHAEL E. RYAN
Amador County Tax Collector

APPROVAL BY BOARD OF SUPERVISORS

Pursuant to the above notice and request, approval for said sale is hereby granted. The Amador County Tax Collector is directed to sell the property described in said notice as provided for by law pursuant to Chapter 7 of Part 6 of Division 1 of the California Revenue and Taxation Code. Approval is further granted to re-offer unsold parcels at a price which the Tax Collector deems appropriate, pursuant to Section 3698.5, Revenue and Taxation Code.

The foregoing was approved by the Board of Supervisors of the County of Amador, the ___ day of _____, 2015.

ATTEST:

Jennifer Burns, Clerk of the Board of Supervisors, Amador County, California

Deputy

AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Resol.

Date: 09/24/2015

From: Tacy Oneto Rouen, Auditor-Controller
(Department Head - please type)

Phone Ext. #363

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
<u>10/13/2015</u>	

Department Head Signature

Tacy Oneto Rouen

Agenda Title: Resolution

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Appropriation Limit for Fiscal Year 2015-2016.

Recommendation/Requested Action:

Approve Resolution for Appropriation Limit

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required?

Yes

No

Committee Review?

N/A

Name _____

Committee Recommendation: _____

Contract Attached:

Yes

No

N/A

Resolution Attached:

Yes

No

N/A

Ordinance Attached:

Yes

No

N/A

Comments: _____

Request Reviewed by:

Chairman *[Signature]*

Counsel *GG*

Auditor *YOR*

GSA Director *HP*

CAO *[Signature]*

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Auditor _____

FOR CLERK USE ONLY

Meeting Date

October 13, 2015

Time

9 a.m.

Item #

3B

Board Action: Approved Yes ___ No ___

Unanimous Vote: Yes ___ No ___

Ayes: _____

Resolution _____

Ordinance _____

Other: _____

Noes: _____

Resolution _____

Ordinance _____

Absent: _____

Comments: _____

Distributed on _____

A new ATF is required from _____

Department _____

For meeting _____

of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

ATTEST: _____

Clerk or Deputy Board Clerk

**BEFORE THE BOARD OF SUPERVISORS OF THE
COUNTY OF AMADOR, STATE OF CALIFORNIA**

IN THE MATTER OF :

RESOLUTION ESTABLISHING THE 2015-2016)
FISCAL YEAR APPROPRIATIONS LIMIT) RESOLUTION NO.

BE IT RESOLVED by the Board of Supervisors of the County of Amador, State of California, that said Board does hereby establish the 2015-2016 Fiscal Year Appropriations Limit, pursuant to Section 7910 of the Government Code, as amended by Senate Bill 1352, as outlined in the attached memorandum from Mrs. Tacy Oneto Rouen, Auditor-Controller.

The foregoing resolution was duly passed and adopted by the Board of Supervisors of the County of Amador at a regular meeting hereof, held on the 13th day of October, 2015, by the following vote:

AYES:

NOES:

ABSENT:

Chairman, Board of Supervisors

ATTEST:

JENNIFER BURNS, Clerk of the
Board of Supervisors, Amador County,
California

Deputy

**AMADOR COUNTY
SPENDING LIMIT CALCULATION
FISCAL YEAR 2015-16**

APPROPRIATIONS SUBJECT TO LIMIT

Fiscal year 2015-16	
General and related fund revenues	70,272,839
Less	
Non-proceeds of taxes	(45,316,067)
Plus:	
User fees in excess of costs	0
Total appropriations subject to limit	24,956,772

APPROPRIATIONS LIMIT

Fiscal year 2014-15	
Appropriation limit	34,059,526
A. Cost of living adjustment-CPI*	1.0382
B. Population adjustment**	1.0054
Change factor (A*B)	1.0438
Trial court funding adjustment	
Less current year	0
Plus prior year	0
Increase in appropriation limit	1,492,021
Fiscal year 2015-16	
Appropriation limit	35,551,547
Remaining appropriation capacity (deficit)	10,594,775
Available capacity as a percent of appropriation limit	29.8012%

**AMADOR COUNTY
SPENDING LIMITS CALCULATION
FISCAL YEAR 2015-2016**

REVENUE SOURCE	PROCEEDS OF TAXES	NON-PROCEEDS OF TAXES	TOTAL	
PROPERTY TAXES:				
CURRENT SECURED	14,839,550		14,839,550	A
CURRENT UNSECURED	285,600		285,600	B
PRIOR SECURED			0	
PRIOR UNSECURED	7,100		7,100	C
SUPPLEMENTAL CURRENT	10,200		10,200	D
DELINQUENT SUPPLEMENTAL	13,737		13,737	D1
PROP TAX IN LIEU VLF	4,004,000		4,004,000	A1
PENALTIES & COSTS			0	
OTHER TAXES:				
SALES & USE	2,190,122		2,190,122	E
IN-LIEU SALES TAX	763,403		763,403	E1
ROOM OCCUPANCY TAX	198,000		198,000	F
REAL PROPERTY TRANSFER	175,000		175,000	G
FRANCHISE TAXES/FEES		363,000	363,000	22,849,712 H
LICENSES & PERMITS:				
ANIMAL LICENSES		45,000	45,000	I
CONSTRUCTION PERMITS		240,000	240,000	J
FACILITIES FEES		10,000	10,000	J1
ZONING PERMITS		25,000	25,000	K
OTHER LICENSES & PERMITS		47,700	47,700	367,700 L
FINES, FORFEITS, & PENALTIES:				
VEHICLE CODE FINES		490,000	490,000	M
OTHER COURT FINES		4,229	4,229	N
TOBACCO SETTLEMENT		332,047	332,047	O
EXCESS TAX LOSS RESERVE		511,356	511,356	1,337,632 OO
INTERGOVERNMENTAL REVENUES ST:				
TIMBER TAX LOSS		8,584	8,584	P
MOTOR VEHICLE IN-LIEU	13,303		13,303	Q
OTHER STATE IN-LIEU	0		0	QQ
PUBLIC SAFETY	2,147,140		2,147,140	R
PUBLIC ASSISTANCE/AID		5,631,449	5,631,449	T
CIGARETTE TAX			0	
OPEN SPACE SUBVENTION	0		0	S
HOMEOWNERS EXEMPTION	190,200		190,200	SS
OTHER STATE REVENUE		15,951,814	15,951,814	V
LOCAL REVENUE		5,441,259	5,441,259	VV
INTERGOVERNMENTAL REVENUES FED				
PILT		32,000	32,000	34,634,822 UU
CHARGES FOR CURRENT SERVICES		2,963,690	2,963,690	2,963,690 X
CHARGES COUNTY LOCAL REVENUE		4,289,782	4,289,782	4,289,782 XX
OTHER REVENUES		2,968,591	2,968,591	2,968,591 Y
INTERFUND TRANSFERS		524,658	524,658	524,658 Z
SUBTOTAL	24,837,355	45,099,232	69,936,587	69,936,587
PERCENT OF TOTAL	35.5141%	64.4859%	100.0000%	
INTEREST	119,417	216,835	336,252	BB
TOTAL-GENERAL & RELATED FUNDS	24,956,772	45,316,067	70,272,839	AA

COUNTY OF AMADOR
 STATE OF CALIFORNIA
 DETAIL OF ADDITIONAL FINANCING SOURCES BY FUND AND ACCOUNT
 FISCAL YEAR 2015-2016

SCHEDULE 6

FUND		FINANCING SOURCE ACCOUNT		ADOPTED 2015-2016	
A	11000 GENERAL	41010 CURRENT SECURED	14,839,550.00		
A1	11000 GENERAL	41130 PROP TAX IN LIEU VLF	4,004,000.00		
B	11000 GENERAL	41020 CURRENT UNSECURED	285,600.00		
BB	10500 MEMORIAL HALL	44100 INTEREST 101150	0.00		
BB	11000 GENERAL	44100 INTEREST 101110	250,691.00		
BB	11600 SOCIAL SERVICES	44100 INTEREST 101160	0.00		
BB	11700 BEHAVIORAL HEALTH	44100 INTEREST 101170	246.00		
BB	11800 HEALTH	44100 INTEREST 101180	0.00		
BB	12000 ROAD	44100 INTEREST 101120	20,000.00		
BB	15000 WATER DEVELOPMENT	44100 INTEREST 101150	20,000.00		
BB	18100 COUNTY IMPROVEMENT	44100 INTEREST 101181	2,500.00		
BB	20000 FISH/GAME	44100 INTEREST 101200	100.00		
BB	20500 LOCAL REVENUE	44100 INTEREST 101205	0.00	293,537.00	
BB	11000 GENERAL	44200 RENTALS	38,480.00		336,252.00
BB	18100 COUNTY IMPROVEMENT	44200 RENTALS	4,235.00		
C	11000 GENERAL	41100 PRIOR UNSECURED	7,100.00		
D	11000 GENERAL	41120 SUPPLEMENTAL ROLL	10,200.00		
D1	11000 GENERAL	41121 PRIOR SUPPLEMENTAL	13,737.00		
E	11000 GENERAL	41160 SALES AND USE TAXES	2,190,122.00		
E	12000 ROAD	41160 SALES AND USE TAXES	0.00		
E	12000 ROAD	41190 SALES TAXES L.T.C.	0.00		
E1	11000 GENERAL	41170 IN-LIEU SALES TAX	763,403.00		2,190,122.00
F	11000 GENERAL	41200 ROOM OCCUPANCY TAXES	198,000.00		
G	11000 GENERAL	41210 TRANSFER TAXES	175,000.00		
H	11000 GENERAL	41180 FRANCHISE TAXES	363,000.00		
I	11000 GENERAL	42100 ANIMAL LICENSES	45,000.00		
J	11000 GENERAL	42120 CONSTRUCTION PERMITS	240,000.00		
J1	18100 COUNTY IMPROVEMENT	42125 FACILITIES FEE	10,000.00		
K	11000 GENERAL	42140 ZONING PERMITS	25,000.00		
L	11000 GENERAL	42130 GRADING PERMITS	11,000.00		
L	12000 ROAD	42135 ROAD PERMITS	25,500.00		
L	11000 GENERAL	42160 OTHER LICENSES AND PERMITS	11,200.00		
M	12000 ROAD	43170 VEHICLE CODE FINES	24,000.00		47,700.00
M	11000 GENERAL	43190 JUSTICE COURT-GENERAL FINES	21,000.00		

COUNTY OF AMADOR
STATE OF CALIFORNIA

DETAIL OF ADDITIONAL FINANCING SOURCES BY FUND AND ACCOUNT

FISCAL YEAR 2015-2016
AB2233

M	11000 GENERAL	43195 FINES AND FEES	390,000.00					
M	11000 GENERAL	43221 PROBATION FEES	55,000.00					
M	11000 GENERAL	43222 BAIL BOND FORFEITURE	0.00					490,000.00
N	20000 FISH/GAME	43200 OTHER COURT FINES (FISH & GAME)	1,229.00					
N	11000 GENERAL	43210 OTHER COURT FINES (GENERAL)	3,000.00					4,229.00
O	11000 GENERAL	43300 TOBACCO SETTLEMENT	332,047.00					
O	11000 GENERAL	43233 EXCESS TAX LOSS RESERVE	511,356.00					
P	11000 GENERAL	45330 STATE TIMBER TAX LOSS	8,584.00					
Q	11000 GENERAL	45070 STATE MOTOR VEHICLE IN-LIEU TAX	13,303.00					
QQ	12000 ROAD	45100 STATE PROPOSITION 42	0.00					
QQ	12000 ROAD	45101 STATE PROP 1B 2006 BOND ACT	0.00					
R	11000 GENERAL	45242 STATE AID - PUBLIC SAFETY	2,147,140.00					
SS	11000 GENERAL	45260 STATE HOMEOWNERS PROPERTY TAX RELIE	190,200.00					
T	11000 GENERAL	45130 STATE WELFARE ADMINISTRATION	0.00					
T	11600 SOCIAL SERVICES	45130 STATE WELFARE ADMINISTRATION	1,609,349.00					
T	11000 GENERAL	45160 STATE PUBLIC ASSISTANCE	250,000.00					
T	11600 SOCIAL SERVICES	45520 FEDERAL PUBLIC ASSISTANCE ADMINISTRA	10,000.00					
T	11001 GENERAL	45520 FEDERAL PUBLIC ASSISTANCE ADMINISTRA	2,241,500.00			2,251,500.00		
T	11600 SOCIAL SERVICES	45540 FEDERAL PUBLIC ASSISTANCE	5,600.00					
U	11700 BEHAVIORAL HEALTH	45540 FEDERAL PUBLIC ASSISTANCE	1,515,000.00			1,520,600.00		5,631,449.00
U	12000 ROAD	45180 FEDERAL AID FOR DRUG PREVENTION	425,082.00					
U	12000 ROAD	45570 FEDERAL ROAD CONSTRUCTION FAS	2,641,210.00					
U	11000 GENERAL	45575 STATE MATCH EXCHANGE PROGRAM	333,812.00					
U	12000 ROAD	45580 FEDERAL FOREST RESERVE REVENUE	65,170.00					
U	11000 GENERAL	45580 FEDERAL FOREST RESERVE REVENUE	45,000.00			443,982.00		
U	11600 SOCIAL SERVICES	45630 FEDERAL OTHER	63,803.00					
U	11700 BEHAVIORAL HEALTH	45630 FEDERAL OTHER	15,000.00					
U	11800 HEALTH	45630 FEDERAL OTHER	50,000.00					
U	12000 ROAD	45630 FEDERAL OTHER	711,686.00					
U	11000 GENERAL	45635 FEDERAL ARRA	0.00			840,489.00		
U	11700 BEHAVIORAL HEALTH	45640 AID FROM OTHER AGENCIES	45,000.00					
U	11800 HEALTH	45640 AID FROM OTHER AGENCIES	0.00					
U	12000 ROAD	45640 AID FROM OTHER AGENCIES	120,960.00			165,960.00		
U	12000 ROAD	45642 RIP FUNDING	702,350.00					
UU	11000 GENERAL	45590 FEDERAL P.I.L.T.	32,000.00					5,219,073.00
V	12000 ROAD	45050 STATE GAS TAX-SECTION 2104	679,099.00					
V	12000 ROAD	45060 STATE GAS TAX-SECTION 2106	158,397.00					

COUNTY OF AMADOR
STATE OF CALIFORNIA

		FISCAL YEAR 2015-2016		DETAIL OF ADDITIONAL FINANCING SOURCES BY FUND AND ACCOUNT	
V	12000 ROAD	45061 STATE GAS TAX-SECTION 2103	492,064.00		
V	12000 ROAD	45062 STATE GAS TAX-SECTION 2103	290,845.00		
V	11000 GENERAL	45071 STATE VEHICLE LIC. 17604 W.I.C.	2,000,000.00		
V	11800 HEALTH	45163 STATE REALIGNMENT HEALTH	1,619,649.00		
V	11700 BEHAVIORAL HEALTH	45164 STATE REALIGNMENT MENTAL HEALTH	789,032.00		
V	11600 SOCIAL SERVICES	45165 STATE REALIGNMENT SS	2,851,500.00		
V	11700 BEHAVIORAL HEALTH	45190 STATE AID FOR ALCOHOLISM	0.00		
V	11000 GENERAL	45191 STATE SUBSTANCE ABUSE PROP 36	0.00		
V	11700 BEHAVIORAL HEALTH	45191 STATE SUBSTANCE ABUSE PROP 36	0.00		
V	11700 BEHAVIORAL HEALTH	45192 STATE OTP	0.00		
V	11700 BEHAVIORAL HEALTH	45193 STATE CDCI	0.00		
V	11700 BEHAVIORAL HEALTH	45200 STATE AID FOR MENTAL HEALTH	982,000.00		
V	11700 BEHAVIORAL HEALTH	45201 MHA PROP 63	2,126,687.00		
V	11700 BEHAVIORAL HEALTH	45202 MENTAL HEALTH AB100	0.00		
V	11000 GENERAL	45220 STATE AID FOR AGRICULTURE	200,000.00		
V	11000 GENERAL	45230 STATE AID FOR CIVIL DEFENSE	175,000.00		
V	11000 GENERAL	45240 STATE AID - OTHER	548,540.00		
V	11600 SOCIAL SERVICES	45240 STATE AID - OTHER	500.00		
V	11800 HEALTH	45240 STATE AID - OTHER	319,212.00	868,252.00	
V	11600 SOCIAL SERVICES	45250 STATE AID FOR VETERANS AFFAIRS	67,500.00		
V	12000 ROAD	45300 STATE MEDICALLY INDIGENT ADULT	1,500.00		
V	11000 GENERAL	45340 STATE OTHER-ROAD	0.00		
V	11800 HEALTH	45370 STATE - OTHER	0.00		
V	11000 GENERAL	45435 STATE TOBACCO REDUCTION PROGRAM	150,000.00		
V	11000 GENERAL	45440 STATE AID FOR PATROL BOAT	121,122.00		
V	11000 GENERAL	45470 STATE VICTIM WITNESS PROGRAM	101,000.00		
V	11000 GENERAL	45481 STC TRAINING REIMBURSEMENT	20,160.00		
V	11600 SOCIAL SERVICES	45490 STATE MANDATE COST	130,950.00		
V	11700 BEHAVIORAL HEALTH	45490 STATE MANDATE COST	0.00		
V	11800 HEALTH	45490 STATE MANDATE COST	0.00		
V	12000 ROAD	45490 STATE MANDATE COST	0.00		
V	11000 GENERAL	45491 STATE COURT COST 4750 PC	393,202.00		
V	11000 GENERAL	45495 STATE VLF ADJUSTMENT	1,710,855.00		
V	11000 GENERAL	45502 P.O.S.T	23,000.00	15,951,814.00	
VV	20500 LOCAL REVENUE	4516701 AB109	0.00		
VV	20500 LOCAL REVENUE	4516710 TRIAL COURT SECURITY	615,307.00		
VV	20500 LOCAL REVENUE	4516720 LOCAL COMMUNITY CORRECTION	984,099.00		

COUNTY OF AMADOR
STATE OF CALIFORNIA

FISCAL YEAR 2015-2016

DETAIL OF ADDITIONAL FINANCING SOURCES BY FUND AND ACCOUNT

VV	20500 LOCAL REVENUE	4516730 LOCAL LAW ENFORCEMENT	806,396.00
VV	20500 LOCAL REVENUE	4516740 MENTAL HEALTH	0.00
VV	20500 LOCAL REVENUE	4516750 DA/PD	34,800.00
VV	20500 LOCAL REVENUE	4516761 JUVENILE JUSTICE YOYG	134,168.00
VV	20500 LOCAL REVENUE	4516762 JUVENILE REENTRY GRANT	0.00
VV	20500 LOCAL REVENUE	4516763 JUVENILE PROBATION	101,165.00
VV	20500 LOCAL REVENUE	4516770 HHS ADULT PS	0.00
VV	20500 LOCAL REVENUE	4516771 HHS FC	0.00
VV	20500 LOCAL REVENUE	4516772 HHS CW	0.00
VV	20500 LOCAL REVENUE	4516773 HHS ADOPTION	0.00
VV	20500 LOCAL REVENUE	4516774 HHS ADOPTION ASSIST	0.00
VV	20500 LOCAL REVENUE	4516775 HHS CAP	0.00
VV	20500 LOCAL REVENUE	4516776 HHS W & C RTS	0.00
VV	20500 LOCAL REVENUE	4516777 HHS DRUG COURT	0.00
VV	20500 LOCAL REVENUE	4516778 HHS NON DRUG MEDI CAL	0.00
VV	20500 LOCAL REVENUE	4516779 HHS DRUG MEDI CAL	0.00
VV	20500 LOCAL REVENUE	4516780 RESERVE	0.00
VV	20500 LOCAL REVENUE	4516781 BEHAVIORIAL HEALTH	880,023.00
VV	20500 LOCAL REVENUE	4516782 PROTECTIVE SERVICES	1,788,700.00
VV	20500 LOCAL REVENUE	4516783 PROTECTIVE SERVICES BASE REST	60,000.00
VV	20500 LOCAL REVENUE	4516784 PROTECTIVE SERVICES REMAIN 90%	30,000.00
VV	20500 LOCAL REVENUE	4516785 PROTECTIVE SERVICES REMAIN 10%	3,300.00
VV	20500 LOCAL REVENUE	4516786 FAMILY SUPPORT SUBACCOUNT	3,301.00
X	11000 GENERAL	46009 CHARGES FOR SERVICES	130,000.00
X	11600 SOCIAL SERVICES	46009 CHARGES FOR SERVICES	0.00
X	11800 HEALTH	46009 CHARGES FOR SERVICES	0.00
X	12000 ROAD	46025 IMPACT FEES	58,440.00
X	11000 GENERAL	46106 APPEAL FEES	600.00
X	11000 GENERAL	46170 SURVEY MONUMENT PRESERVATION	0.00
X	11000 GENERAL	46520 OTHER COURT REVENUES	0.00
X	11000 GENERAL	46640 ASSESSMENT AND TAX COLLECTION FEES	114,300.00
X	11000 GENERAL	46641 TAX COLLECTORS FEES	54,000.00
X	11000 GENERAL	46650 TAX COLLECTOR PUBLICATIONS	150.00
X	11000 GENERAL	46671 RECORDER MODERNIZATION	113,763.00
X	11000 GENERAL	46672 SOCIAL SECURITY TRUNCATION TRUST FUN	26,900.00
X	11000 GENERAL	46691 PUBLIC CONSERVATORS FEES	13,130.00
X	11000 GENERAL	46693 COUNTY COUNSEL FEES	9,000.00
X	11000 GENERAL	46694 SUPERIOR CT ATTY FEES REIMB.	4,000.00

5,441,259.00

COUNTY OF AMADOR
STATE OF CALIFORNIA
DETAIL OF ADDITIONAL FINANCING SOURCES BY FUND AND ACCOUNT

	FISCAL YEAR 2015-2016	
X	11000 GENERAL	22,200.00
X	11000 GENERAL	90,000.00
X	11000 GENERAL	3,300.00
X	11000 GENERAL	3,600.00
X	11000 GENERAL	31,000.00
X	11000 GENERAL	826,283.00
X	11000 GENERAL	834,247.00
X	11000 GENERAL	22,130.00
X	11000 GENERAL	158,000.00
X	11000 GENERAL	1,000.00
X	11000 GENERAL	15,000.00
X	11000 GENERAL	37,747.00
X	11000 GENERAL	30,000.00
X	11700 BEHAVIORAL HEALTH	0.00
X	11700 BEHAVIORAL HEALTH	20,500.00
X	11800 HEALTH	260,000.00
X	11800 HEALTH	15,000.00
X	11000 GENERAL	10,000.00
X	11000 GENERAL	49,400.00
X	11700 BEHAVIORAL HEALTH	10,000.00
X	11000 GENERAL	0.00
XX	11000 GENERAL	1,184,219.00
XX	11600 SOCIAL SERVICES	1,882,000.00
XX	11700 BEHAVIORAL HEALTH	1,223,563.00
Y	11000 GENERAL	0.00
Y	15000 WATER DEVELOPMENT	0.00
Y	11000 GENERAL	8,000.00
Y	11600 SOCIAL SERVICES	65,000.00
Y	11000 GENERAL	0.00
Y	18100 COUNTY IMPROVEMENT	0.00
Y	11000 GENERAL	20,000.00
Y	11000 GENERAL	46,450.00
Y	11600 SOCIAL SERVICES	300.00
Y	11700 BEHAVIORAL HEALTH	2,127.00
Y	11800 HEALTH	130,235.00
Y	12000 ROAD	0.00
Y	18100 COUNTY IMPROVEMENT	0.00
Y	11000 GENERAL	0.00
Y	47880 OTHER SALES	20,000.00
Y	47890 MISCELLANEOUS REVENUES	46,450.00
Y	47890 MISCELLANEOUS REVENUES	300.00
Y	47890 MISCELLANEOUS REVENUES	2,127.00
Y	47890 MISCELLANEOUS REVENUES	130,235.00
Y	47890 MISCELLANEOUS REVENUES	0.00
Y	47890 MISCELLANEOUS REVENUES	0.00
Y	47893 SPECIAL DONATIONS	0.00
		2,963,690.00
		4,289,782.00

COUNTY OF AMADOR
 STATE OF CALIFORNIA
 DETAIL OF ADDITIONAL FINANCING SOURCES BY FUND AND ACCOUNT
 FISCAL YEAR 2015-2016

Y	12000 ROAD	47900 MISCELLANEOUS ROAD REVENUES	11,100.00	
Y	11000 GENERAL	47910 CANCELLED WARRANTS	0.00	
Y	11600 SOCIAL SERVICES	47910 CANCELLED WARRANTS	0.00	
Y	11600 SOCIAL SERVICES	47940 OPERATING TRANSFERS	0.00	
Y	11800 HEALTH	47940 OPERATING TRANSFERS	0.00	
Y	12000 ROAD	47940 OPERATING TRANSFERS	1,236,000.00	
Y	18100 COUNTY IMPROVEMENT	47940 OPERATING TRANSFERS	1,449,379.00	2,968,591.00
Z	11000 GENERAL	47960 STREETS & ROADS - INDIAN GAMING	0.00	
Z	11000 GENERAL	48080 COUNTY BUILDING MAINTENANCE	10,000.00	
Z	12000 ROAD	48410 AG DEPARTMENT	0.00	
Z	12000 ROAD	48800 ROAD-OTHER COUNTY OFFICES	153,750.00	
Z	12000 ROAD	48801 ROAD CHARGES PROP 1B	207,212.00	
Z	12000 ROAD	48802 ROAD-P.M./SUBDIVISION	131,500.00	
Z	11000 GENERAL	48813 WASTE MANAGEMENT	22,196.00	524,658.00
AA		TOTAL:		<u><u>70,272,839.00</u></u>

AGENDA TRANSMITTAL FORM

Resol.

To: **Board of Supervisors**
 Date: 10/05/2015

From: Judy Dias, HR Director
 (Department Head - please type)

Phone Ext. 456

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
<u>10/13/2015</u>	

Department Head Signature *Judy Dias*

Agenda Title: Salaries and Fringe Benefits for Mid-Management Employees

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
 Effective October 1, 2015 add the County Surveyor with a salary of \$7,308.00 and the Chief Deputy Registrar of Voters with a salary of \$6,612.00 to the Mid-Management Classifications

Recommendation/Requested Action:
Approval

Fiscal Impacts (attach budget transfer form if appropriate) _____
 Staffing Impacts _____

Is a 4/5ths vote required? Yes No

Committee Review? Name Administrative Committee N/A

Committee Recommendation:
Approve

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Comments: _____

Request Reviewed by:
 Chairman *B* Counsel *CG*
 Auditor *JOR* GSA Director _____
 CAO *ab* Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)
Human Resources, Auditor, Clerk/Recorder and Surveyor

FOR CLERK USE ONLY

Meeting Date October 13, 2015 Time 9 a.m. Item # 30

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___
 Ayes: _____ Resolution _____ Ordinance _____ Other: _____
 Noes _____ Resolution _____ Ordinance _____
 Absent: _____ Comments: _____

Distributed on _____
 Completed by _____
 A new ATF is required from _____ Department For meeting of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
 ATTEST: _____
 Clerk or Deputy Board Clerk

**BEFORE THE BOARD OF SUPERVISORS OF THE
COUNTY OF AMADOR, STATE OF CALIFORNIA**

IN THE MATTER OF:

RESOLUTION RELATIVE TO SALARIES AND FRINGE) RESOLUTION NO. 15-xxx
BENEFITS FOR MID-MANAGEMENT EMPLOYEES)

BE IT RESOLVED that this resolution is being adopted to reflect the following change:

- Effective October 1, 2015 add the County Surveyor with a salary of \$7,308.00 and the Chief Deputy Registrar of Voters with a salary of \$6,612.00 to the Mid-Management Classifications

Classifications	Monthly Salaries	Voluntary Reduction of Hours (156.6 per mo.)
Animal Control Director	\$6,856	\$6,170
Assistant Assessor	\$6,826	\$6,143
Assistant Auditor-Controller	\$7,729	\$6,956
Assistant County Counsel (vacant)	\$10,410	\$9,369
Chief Building Official	\$6,995	\$6,296
Chief Deputy Clerk/Recorder Local Registrar of Births & Deaths	\$7,952	\$7,157
Chief Deputy Registrar of Voters	\$6,612	\$5,951
Chief Deputy Treasurer/Tax Collector	\$5,972	\$5,375
County Librarian	\$7,743	\$6,969
County Surveyor	\$7,308	\$6,577
Deputy Director of Behavioral Health (Fiscal and Administrative Services)	\$7,425	\$6,683
Deputy Director of General Services Administration (vacant)	\$8,618	\$7,756
Deputy Director of Public Works Projects (vacant)	\$8,286	\$7,457
Deputy Director of Social Services (Finance/Facilities/Administration) (vacant)	\$7,425	\$6,683
Deputy Director of Social Services (Social Services Agency Programs) (vacant)	\$7,520	\$6,768
Director of Environmental Health	\$7,882	\$7,094
Health Services Director (vacant)	\$9,478	\$8,530
GSA County Government Support Services Director (vacant)	\$8,001	\$7,201
OES Coordinator (vacant)	\$5,754	\$5,179
Planning Director	\$8,655	\$7,790
Public Works Maintenance Superintendent (vacant)	\$7,254	\$6,529
Psychiatrist (vacant)	\$19,013	\$17,112
Social Services Director (vacant)	\$9,822	\$8,840

TERMS AND CONDITIONS

1. Employees herein identified serve at the pleasure of their respective Agency/Department Head or Elected Official, with the concurrence of the CAO. However, in the event of a proposed action that could result in demotion, reduction in hours, loss of pay, or termination, the concurrence of the Board of Supervisors shall be required if either the department head or the employee requests same. Such request(s) shall be made in writing within seven (7) working days of written notice of the proposed action.
2. Personnel covered by this resolution are required to devote the appropriate amount of time at their place of work, either in the office or at other sites, necessary to complete the responsibilities and duties of their positions.
3. With the exception of the OES Coordinator, Mid-Management employees are *exempt* from the Fair Labor Standards Act (FLSA) as it relates to wages and overtime requirements. Exempt employees are not eligible for overtime. The OES Coordinator is covered by the FLSA as it relates to wages, overtime, record keeping, and equal pay standards.

BENEFIT PACKAGE

4. **Voluntary Reduced Work Schedule:** Effective July 1, 2015, employees have the option to continue their voluntary reduced work schedule of 156.6 hours per month, request a voluntary reduced work schedule of 156.6 hours or rescind their previous request for a voluntary reduced work schedule. Employee's seniority, benefits and leave accruals will not be affected.
5. **Retirement Program:** Employees herein shall receive the same Public Employees' Retirement System program offered to the County's General bargaining group; as such program may be amended from time to time. The Employer Paid Member Contribution (EPMC) shall be as follows:
 - A. The EPMC shall be 1% for all Classic employees in this unit.
 - B. Effective January 1, 2013 all employees hired as new employees according to PERS regulations shall pay one-half of normal cost as determined by CalPERS.
6. **Health Insurance:** Employees herein shall be eligible for the same group health insurance programs provided to the County's General Unit bargaining group.
 - A. Mid-Management employees retiring from County service shall be granted the right to continue participation in the group health insurance programs provided for active Mid-Management employees, to the extent said insurance programs allow, ***at the retired employee's expense.***
 - B. For full-time Mid-Management employees, a cash payment of \$466.10 shall be paid to all Mid-Management employees in lieu of major medical insurance other than the County's, after proof of other major medical insurance has been obtained. The County shall retain the remainder of the premium it otherwise would have paid to that employee. If the employee waives all benefits except life insurance, the cash total is \$506.10.
7. **Sick Leave:** Employees herein shall accrue sick leave at the same rate as the County's General Unit bargaining group as follows:
 - A. Regular full-time and regular part-time employees shall earn and accrue paid sick leave in regular increments each pay period of employment up to a maximum of 96 hours per year.

- B. For employees on a voluntary reduced work schedule of 156.6 hours per month, they will accrue 8 hours sick leave per month up to a maximum of 96 hours per year.
- C. Unused sick leave shall accrue from year to year.
- D. Upon retirement only, an employee who has accrued a minimum of 500 sick leave hours **may**, upon request of the employee, be paid in cash for one-half of the number of accrued sick leave hours up to a maximum payoff of 500 hours, with the balance of unused sick leave going toward PERS service credit.

8. **Vacation Leave:** Employees herein shall earn and accrue paid vacation leave in accordance with the following provisions (All other terms and conditions shall be the same as the County's General bargaining group):

- A. **Years 1-9:** For the first through the ninth continuous years of service, vacation leave shall be earned and accrued at the rate of eight (8) hours of vacation leave for every 130.5 hours of service, which accrual shall be credited monthly. For employees on a voluntary reduced work schedule of 156.6 hours per month, they will accrue eight (8) hours of vacation leave for every 117.45 hours of service, which accrual will be credited monthly.
- B. **Years 10 Plus:** For the tenth and succeeding continuous years of service, vacation leave shall be earned and accrued at the rate of eight (8) hours of vacation leave for every 99.43 hours of service, which accrual shall be credited monthly. For employees on a voluntary reduced work schedule of 156.6 hours per month, they will accrue eight (8) hours of vacation leave for every 89.49 hours of service, which accrual shall be credited monthly.
- C. Employees will only be allowed to carry over a two (2) year vacation accrual maximum. Accrual of vacation leave shall cease when the maximum amount of vacation leave allowed has accrued and been unused by the employee, but shall recommence when the unused balance of an employee's accrued vacation leave is below the maximum allowed accrual.
- D. An employee may elect to be paid off in cash (up to 40 hours only); provided, however, that the criteria outlined in the Amador County Policies and Procedures Manual (Policy #2-230) has been met. An employee may elect to be paid off once a year at the end of the calendar year or at the end of the fiscal year.

9. **Holiday Leave:** Mid-Management employees will receive the same paid holiday leave as the County's General bargaining group. For employees taking the voluntary reduced work schedule of 156.6 hours per month, they will be paid eight (8) hours of holiday pay. Any difference in the number of hours used on that holiday can be taken from vacation leave. If vacation leave is not available, employees will be docked the difference in pay.

10. **Professional Leave:** Mid-Management Classifications listed below shall accrue up to five (5) days of professional leave each calendar year at the rate of 8 hours of professional leave for every 417.6 hours of service, credited monthly. For employees on a voluntary reduced work schedule of 156.6 hours per month, they will accrue up to five (5) days of professional leave each calendar year at a rate of 8 hours of professional leave for every 375.84 hours of service, credited monthly, subject to the following conditions:

- A. An employee may accrue professional leave up to a maximum amount equal to twice their current annual professional accrual rate. Accrual of professional leave shall cease when the maximum amount of professional leave allowed has accrued and been unused by the employee, but shall recommence when the unused balance of an employee's accrued professional leave is below the maximum allowed accrual.

- B. Part-time employees will have the leave pro-rated based on the numbers of hours worked.
- C. If an eligible employee separates from County employment, said employee will not be paid in cash for any unused professional leave. However, if an eligible employee moves to another County employment classification which has no professional leave, said employee will be paid off in cash.
- D. An employee is required to have such leave approved by their agency/department head.
- E. An employee must prepare written documentation supporting their professional development leave and its relationship to their position.
- F. This leave is not intended to preclude the normal assignment of training or professional development hours required by the position and compensated as a normal part of expected functions.
- G. Eligible Classifications: Assistant County Counsel, Health Services Director and Deputy Director of Public Works Projects
- H. The purpose for this Professional Leave shall be to provide additional time for eligible employees to continue education as required to maintain necessary professional development levels.

11. **Employee Wellness Program**: The County agrees to provide up to \$100.00 per calendar year cost reimbursement to non-smoking Mid-Management employees who participate in an organized fitness program or organized weight-reduction program.

EFFECTIVE DATE

Effective Date. The effective date of changes for this Resolution shall be October 1, 2015.

The foregoing resolution was duly passed and adopted by the Board of Supervisors of the County of Amador at a regular meeting thereof, held on the 13th day of October, 2015 by the following vote:

AYES: Brian Oneto, John Plasse, Richard M. Forster, Louis D. Boitano,
and Lynn Morgan

NOES: None

ABSENT: None

Chairman, Board of Supervisors

ATTEST:
JENNIFER BURNS, Clerk of the
Board of Supervisors, Amador County,
California

Deputy

AGENDA TRANSMITTAL FORM

To: **Board of Supervisors**

Date: 9-30-2015

Resol.

- Regular Agenda
- Consent Agenda
- Blue Slip
- Closed Session

Meeting Date Requested:

10/13/15

From: Susan Grijalva
(Department Head - please type)

Phone Ext. X 380

Department Head Signature *Susan Grijalva*

Agenda Title: Building Department-Limited Density Owner-Built Rural Dwelling / LD01007

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
Earle F. Jones III and Danette S. Jones have submitted an application for a Limited Density Owner-Built Rural Dwelling. they have provided all of the necessary documents including the "AGREEMENT" for the structure as required by Amador County Code Section 15.10.160.

Recommendation/Requested Action:

Adopt the resolution and authorize the Chairman to sign the "Agreement".

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
Resolution Attached: Yes No N/A
Ordinance Attached: Yes No N/A

Committee Review? N/A

Name _____

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman *[Signature]*

Counsel _____

Auditor *JGR*

GSA Director *Hop*

CAO *[Signature]*

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

When Agreement is signed, return to Building Dept. w/certified Resolution & Acknowledgement of the Chairman's signature.

FOR CLERK USE ONLY

Meeting Date October 13, 2015 Time 9 a.m. Item # 3D

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes: _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____

A new ATF is required from _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Completed by _____

Department _____

ATTEST: _____

For meeting _____

Clerk or Deputy Board Clerk

of _____

Recording requested by:
BOARD OF SUPERVISORS

When recorded send to:
BUILDING DEPARTMENT

BEFORE THE BOARD OF SUPERVISORS OF THE
COUNTY OF AMADOR, STATE OF CALIFORNIA

IN THE MATTER OF:

RESOLUTION AUTHORIZING RECORDATION OF)
AGREEMENT TO CONSTRUCT A LIMITED DENSITY OWNER-) RESOLUTION NO. 15-xxx
BUILT RURAL DWELLING -- EARLE F. JONES III AND)
DANETTE S. JONES)

WHEREAS, Earle F. Jones III and Danette S. Jones, ("Owner"), desire to construct a Limited Density Owner-Built Rural Dwelling on their property; and

WHEREAS, Owner has applied for a Limited Density Owner-Built Rural Dwelling Building Permit and has complied satisfactorily with all other conditions of the Application for the Permit; and

WHEREAS, an Agreement, to construct a Limited Density Owner-Built Rural Dwelling as required by Amador County Code Section 15.10.160, was approved by the Board of Supervisors at their October 13, 2015 meeting for Building Permit #LD01007; and

WHEREAS, Owner certifies that the Limited Density Owner-Built Rural Dwelling authorized pursuant to Article 8 of Title 25 of the California Code of Regulations is constructed according to the 1985 California Building Code Cycle.

THEREFORE, BE IT HEREBY RESOLVED by the Board of Supervisors of the County of Amador that said Board does hereby approve the Limited Density Owner-Built Rural Dwelling Agreement by and between the County of Amador and Earle F. Jones III and Danette S. Jones on the terms and conditions contained therein as it relates to Building Permit #LD01007.

BE IT FURTHER RESOLVED that the Chairman of said Board is hereby authorized to sign, execute and record said Agreement on behalf of the County of Amador.

The foregoing resolution was duly passed and adopted by the Board of Supervisors of the County of Amador at a regular meeting thereof, held on the 13th day of October, 2015 by the following vote:

AYES:

NOES:

ABSENT:

Brian Oneto
Chairman, Board of Supervisors

ATTEST:

JENNIFER BURNS, Clerk of
the Board of Supervisors,
Amador County, California
By: _____

RECORDING REQUESTED BY AND
WHEN RECORDED MAIL TO:

Amador County Building Department
810 Court Street
Jackson, CA 95642

APN: 021-360-015-000
Limited Density Rural Dwelling: LD01007

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

AGREEMENT

This Agreement is entered into as of October 13, 2015 by and between the COUNTY OF AMADOR, a political subdivision of the State of California (the "County") and Earle F. Jones III and Danette S. Jones, ("Owner").

RECITALS

A. Owner owns certain real property (the "Property") situated in the unincorporated area of the County of Amador, State of California, described as follows:

Parcel 3 as shown and delineated on Parcel Map No. 2273 for John R. and Deborah D. Meyer, being a portion of the Southwest $\frac{1}{4}$ of the Northeast $\frac{1}{4}$ of Section 15, T.7 N., R12 E., M.D.M., being a portion of Parcel 2B of 25-M-47, filed for record July 20, 1990 in Book 44 of Maps and Plats at Page 70, Official Records of Amador County.

Owner desires to construct a Limited Density Owner-Built Rural Dwelling on the Property and has applied for a Limited Density Owner-Built Rural Dwelling Building Permit. This Limited Density Owner-Built Rural Dwelling is constructed according to the 1985 California Building Code Cycle.

B. Owner understands and agrees that the Limited Density Owner-Built Rural Dwelling can only be used as provided in Amador County Code Chapter 15.10 and that any violation of the conditions under which the Limited Density Owner-Built Rural Dwelling was granted may void the permit.

C. As a condition of issuance of the Limited Density Owner-Built Rural Dwelling, the County requires that the restrictions on the use of the structure and all further obligations of Owner set forth in this Agreement run with the land and be made a matter of public record so that any future purchasers of the Property will be made aware of them.

D. Owner is aware that this agreement will be recorded in the Amador County Recorder's Office.

NOW, THEREFORE, the parties agree as follows:

1. Recitals. The parties acknowledge the truth of the recitals set forth above, which are incorporated into this Agreement.
2. Restriction on Use of Limited Density Owner-Built Rural Dwelling. The structure permitted under this section shall be owner-built, owner-occupied and used only for single family residential purposes. The sale, lease, renting or employee occupancy of owner-built structures within three years of a Certificate of Occupancy shall be presumptive evidence that the structure was erected for the purpose of sale, lease or renting.
3. Additional Obligations of Owner.
 - 3.1 Owner understands and agrees that the structure permitted as a Limited Density Owner-Built Rural Dwelling, shall be constructed in compliance with Chapter 15 of the Amador County Code, and all other applicable laws of Amador County, the State of California and any federal laws that may apply.
 - 3.2 Owner acknowledges that if the Limited Density Owner-Built Rural Dwelling permit becomes void or expired, Owner shall be required to remove the structure or fully permit the structure and pay all fees then in effect.
 - 3.3 Owner agrees to indemnify the County of Amador and its agents, officers and employees from any claim, action or proceeding against the County or its agents, officers and employees arising from performance or non performance of its obligations under this Agreement.
4. County's Remedies Upon Default. Owner acknowledges that any violation of this Agreement shall constitute a public nuisance. Upon any violation of this Agreement, the County may pursue any remedies provided by statute or ordinance. In addition to all other remedies provided by law, Owner further agrees that the County or any governmental entity having jurisdiction may obtain immediate injunctive relief against any use of the structure that is inconsistent with this Agreement.
5. Covenant Running with the Land. Owner agrees that the restrictions and obligations of Owner set forth in this Agreement shall be perpetual and run with the land, binding future owners of the Property, unless and until the Limited Density Owner-Built Rural Dwelling is either (i) removed from the property, or (ii) fully upgraded and permitted to the current building code by the County.
6. No Waiver of Remedies. Failure to exercise any remedy provided for in this Agreement shall not, under any circumstances, be construed as a waiver of the remedy.

7. Entire Agreement. This Agreement contains the entire agreement of the parties respecting its subject matter, and supersedes any and all prior discussions, representations, and oral or written agreements, if any, between the parties.

COUNTY:

OWNER: Earle F. Jones III and Danette S. Jones

BY: _____
Brian Oneto
Chairman, Board of Supervisors

BY: _____
Earle F. Jones III

BY: _____
Danette S. Jones

APPROVED AS TO FORM:
GREG GILLOTT,
AMADOR COUNTY COUNSEL

ATTEST:
JENNIFER BURNS, CLERK OF THE
BOARD OF SUPERVISORS

BY: _____

BY: _____
Deputy

[PARTY SIGNATURES MUST BE ACKNOWLEDGED]

RECORDING REQUESTED BY
Western Land Title Company
ORDER # 34179-KC
APN 021-360-015-000
WHEN RECORDED MAIL TO



Amador County Recorder
Sheldon D. Johnson
DOC- 2001-0005475-00
Acct 3-Western Land Title Co
Tuesday, MAY 29, 2001 09:55:00
Ttl Pd \$178.50 Nbr-0000016919
KIM/R1/1-2

Name Earle F. Jones III & Danette S. Jones
Street Address 8 Bourgeois Drive
City State Zip Brandon, MS 39047

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Grant Deed

Monument Preservation Fee is \$10.00
The undersigned grantor(s) declare(s):
Documentary transfer tax is \$ 159.50
(X) computed on full value of property conveyed, or
() computed on full value less value of liens and encumbrances remaining at time of sale.
(X) Unincorporated area: () City of _____
() Realty not sold.

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,
Vernon H. Boyett, a married man, as his sole and separate property

hereby GRANT(S) to Earle F. Jones III and Danette S. Jones, husband and wife, as
Community Property

that property in Amador County, State of California, described as:
* * * See "Legal Description" attached hereto and made a part hereof. * *
*

Mail Tax Statements to Grantee at address above

Date May 7, 2001

Vernon H. Boyett

STATE OF CALIFORNIA
COUNTY OF SAN MATEO

On 5-22-01 before me, the undersigned, a Notary Public in and for said State, personally appeared
VERNON H. BOYETT

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.
Signature
Name LAURO A. GUTIERREZ, JR.
(typed or printed)



(This area for official notarial seal)

ORDER NO. 34179 KC

LEGAL DESCRIPTION
SCHEDULE "C"

All that real property situated in the State of California, County of Amador, Unincorporated Area described as follows:

PARCEL ONE:

Parcel 3 as shown and delineated on Parcel Map No. 2273 for John R. and Deborah D. Meyer, being a portion of the Southwest 1/4 of the Northeast 1/4 of Section 15, T.7 N., R 12 E., M.D.M., being a portion of Parcel 2B of 25-M-47, filed for record July 20, 1990 in Book 44 of Maps and Plats at Page 70, Official Records of Amador County.

PARCEL TWO:

A 30 foot access and utility easement over a portion of Parcel 2, as said easement and parcel is shown on Parcel Map No. 2273.

PARCEL THREE:

A 50 foot access and utility easement over that certain parcel of land designated "Westerly portion Parcel 2B" on Record of Survey for Richard E. Hackett and Mary Jo Hackett, filed for record February 20, 1980 in Book 33 of Maps and Plats, at Page 18, Records of Amador County.

PARCEL FOUR:

A 50 foot access and utility easement over a portion of Parcel 2C, as said easement and said Parcel are shown on Parcel Map No. 1441 referenced above.

APN : 021-360-015-000

CITY : Unincorporated Area

AGENDA TRANSMITTAL FORM

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
10/13/2015	

To: Board of Supervisors

Resol

Date: 10/05/2015

From: James C. Wegner

Phone Ext. 500

(Department Head - please type)

Department Head Signature _____

Agenda Title: Disaster Assistance Resolution

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Request Chairman's signature, for Board of Supervisors to approve resolution authorizing persons to execute applications and documents for federal and/or state disaster assistance funds.

Recommendation/Requested Action:

Recommend approval of resolution and authorize Chairman's signature

Fiscal Impacts (attach budget transfer form if appropriate)

None

Staffing Impacts

None

Is a 4/5ths vote required?

Yes

No

Contract Attached:

Yes

No

N/A

Resolution Attached:

Yes

No

N/A

Ordinance Attached

Yes

No

N/A

Comments: _____

Committee Review?

N/A

Name _____

Committee Recommendation: _____

Request Reviewed by:

Chairman *[Signature]*

Counsel *GG*

Auditor *JOR*

GSA Director *HOP*

CAO *[Signature]*

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Undersheriff, OES, Auditor-Controller

FOR CLERK USE ONLY

Meeting Date

October 13, 2015

Time

9 a.m.

Item #

3E

Board Action: Approved Yes ___ No ___

Unanimous Vote: Yes ___ No ___

Ayes: _____

Resolution _____

Ordinance _____

Other: _____

Noes: _____

Resolution _____

Ordinance _____

Absent: _____

Comments: _____

Distributed on _____

A new ATF is required from _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Completed by _____

Department
For meeting

ATTEST: _____

Clerk or Deputy Board Clerk

of _____

**BEFORE THE BOARD OF SUPERVISORS OF THE
COUNTY OF AMADOR, STATE OF CALIFORNIA**

IN THE MATTER OF:

RESOLUTION APPROVING INDIVIDUALS) RESOLUTION NO. 15-XXX
AS AUTHORIZED AGENTS TO EXECUTE)
APPLICATIONS AND DOCUMENTS FOR)
DISASTER ASSISTANCE)

WHEREAS, Amador County has applied for financial assistance under P.L. 93-288 as amended by the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988, and/or state financial assistance under the California Disaster Assistance Act for damages; and

WHEREAS, the State of California, Governor’s Office of Emergency Services requires the designation of officials authorized to execute documents; and

WHEREAS, the Amador County Board of Supervisors has mandated that applications and agreements be signed by the Chairman of said Board of Supervisors; and

WHEREAS, reports and reimbursement claims sent to the State of California may be signed by other designated individuals listed below;

THEREFORE BE IT RESOLVED by the Board of Supervisors of the County of Amador that the individuals holding the position titles as listed below are hereby designated as Authorized Agents and are authorized to execute for and on behalf of the County of Amador, a public entity established under the laws of the State of California, to provide to the Governor’s Office of Emergency Services this application and all matters pertaining to such state disaster assistance, the assurances and agreements as required.

_____ Sheriff-Coroner, OR

_____ County Administrative Officer, OR

_____ Director, General Services Administration, OR

_____ Auditor-Controller

The foregoing resolution was duly passed and adopted by the Board of Supervisors of the County of Amador at a regular meeting thereof, held on the 13th day of October, 2015, by the following vote:

AYES:

NOES:

ABSENT:

Chairman, Board of Supervisors

ATTEST:

JENNIFER BURNS, Clerk of the
Board of Supervisors, Amador County,
California

Deputy