Agenda Itom #: 3.B. <u></u>

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

Meeting Date: June 17, 2008		(X) Consent () Ordinance		() Regular) Public I	-learing				
De	par	tment:								
		Submitted E	Зу:	Clerk & Comp	<u>troller</u>					
		Submitted F	For:	Finance Depar	rtment					
<u>EX</u>	EC	UTIVE BRIEF	<u>E</u>							
A.		Motion and Title:								
		Staff recommends motion to approve: State Revenue Sharing application for the fiscal year 2008-2009 .								
	В.	Summary:								
		Each unit of local government is required to file an application in order to be considered for any funds to be distributed under the Revenue Sharing Act.								
C.	Ba	ackground and Justification: Section 218.26(4), FS states:								
	"It shall be the duty of each agency and unit of local government required to submit certified information to the Department pursuant to the administration of this part to file timely information." This application must be submitted to the Department of Revenue NO LATER THAN JUNE 30, 2008.									
		Rescue Adn	ninistra	peen reviewed t stor; Rick Brad zabeth Bloeser,	shaw, She	riff; Sha				
D.		achments: Two (2) origir (1 for the Dep		lications: evenue, 1 for th	e official file	s of BCC)			
Red	on	nmended:		Color Han	nmit k:		6-2-	- A Z		
	•		Carte	Hammer, Chie	f Financial	Officer	Date			
App	orov	ved:		N)	A					
			Assis	ant County Ad	minietrator		Date			

II. FISCAL IMPACT ANALYSIS

A.	Five Year Summar	y of Fiscal Imp	act:			
Fisca	l Years	2007	2008	2009	2010	2011
Oper	al Expenditures ating Costs ating Revenues					
Is iter	m included in current	budget?	Yes	No		
Budg	et Account No.: Fund	d Agend	cy Org	Object		
Repo	rting Category					
В.	Recommended	sources of Fu	nds/Summary	/ of Fiscal Impa	act:	
C.	Departmental Fi	scal Review:				
		III. <u>F</u>	REVIEW COM	IMENTS		
Α.	OFMB Budget and/	or Contract De	ev. And Contr	ol Comments:		
	<u>Aprillute</u> OFMB/ Budget	4.5.08 C) 3 08	Contract Deve	Joseph And	(6)5 Jos Control
B.	Legal Sufficiency:					
	Assistant County At	torney	6/08			
C.	Other Department F	Reviews:				
	Department I	Director	·			

THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.



Please TVDE or DDINIT

Application for Revenue Sharing 2008-2009 State Fiscal Year (Chapter 218, Part II Florida Statutes)

DR-700218 R. 04/08

Application deadline is June 30, 2008 Mail completed original application to:

Department of Revenue Revenue Accounting Subprocess P.O. Box 6609 Tallahassee, FL 32399-6609 (850) 487-1150

1 16	ease TIPE OF PAINT				
Na	ame of County	PALM BEACH			
			OR		
Na	ame of Municipality_	4.1		County	
	elephone Number	(561) 35			
Fa	ax Telephone Number	(561) 35	5-3806		
Ma	ayor or Chairman of G	overning Body	Addie Greene	, Chairperson, Board of County Commissi	oners
Ch	nief Fiscal Officer		Sharon R. Boo	ck, Clerk & Comptroller	
E-1	mail Address				
	fficial Mailing Address			· · · · · · · · · · · · · · · · · · ·	
			West Palm Bea	ach, FL 33402	
	ederal Employer I.D. N	umber <u>59-60</u>	000785	previous application(required for new participants only).	
	ease complete the q ar.	uestions below to	determine your elig	gibility to participate in Revenue Sharing for this fisc	al
1.	Have you submitted as required by s. 21	your financial state 8.32, F.S.?	ements for fiscal yea	ar ending 09/30/06 to the Department of Financial Service	 es
2.	s. 11.45, F.S.?	visions for annual p	oostaudits of your fin	nancial accounts as provided by	
	Recid 9)	////07 of Audit Report		9/30/06 Fiscal Year-End	

9/30/07 is almost complete, waiting or final comments (mynt letter)

3.	Have you reported on your most recent financial statement revenues equivalent to three mills calculated based on your 1973 taxable values? This revenue should be net of debt service or special millages approved by the voters. The revenue can be generated by a combination of ad valorem tax, utility tax, occupational license tax, or a payment from the county as allowed by s. 125.01, Florida Statutes.
4.	If you have a law enforcement department, answer the questions below: (If you have a contracted or strictly volunteer department, skip to question 5)
	(A) Have your law enforcement officers, as defined by s. 943.10(1), F.S., met the qualifications for employment as established by the Criminal Justice Standards and Training Commission, and do you compensate them at an annual salary rate of six thousand dollars (\$6,000) or more?
	No No
	(B) Does the salary structure and salary plans for law enforcement officers meet the requirements of Chapter 943 F.S.?
	No No
5.	If you have a fire department, answer the questions below: (If you have a contracted or strictly volunteer
	department, skip to question 6)
	(A) Have your firefighters, as defined by s. 633.30(1), F.S., met the requirements stated in s. 633.34, 633.35, and 633.382 F.S.
	· · · · · · · · · · · · · · · · · · ·
	(B) Does your fire department employ any full-time firefighters, who currently have either a bachelor's degree or associate degree from a college or university which is applicable to fire department duties, if the degree is not a requirement for their current position?
	⊠ Yes
	(C) If so, are these firefighters currently receiving supplemental compensation for those degrees?
	⊠ Yes Will B □ No
3.	Are dependent special districts budgeted separately from the general budget of your government? Do they meet the
	provisions for annual postaudit of their financial accounts in as provided by s. 11.45(3), F.S.?
	Yes C S Does Not Apply
7.	Have you met the requirements of s. 200.065, F.S., if applicable? (The annual certification must be within 30 days of
	adoption of an ordinance or resolution establishing a final property tax levy or, if no property tax is levied, not later
	than November 1.

The portion of revenue sharing funds which, according to Part II, Chapter 218, F.S., would otherwise be distributed to a unit of local government which has not certified compliance or has otherwise failed to meet the requirements of s. 200.065, F.S., shall be deposited in the General Revenue Fund for the 12 months following a determination of noncompliance by the department.)

I certify that all information is accurate and true to the best of my knowledge. I further certify that I will promptly report to the Department of Revenue any changes in the above information. I also realize that failure to provide timely information required, allows the Department to utilize the best information available. If no such information is available, the Department will take necessary action including disqualification, either partial or entire, and you will waive your right to challenge the determination of the Department to your share of funds, if any, beyond your minimum entitlement, according to the privilege of receiving shared revenues from the Revenue Sharing Trust Funds.

Do you believe tha	at you have complied wit	h ALL eligibility requirement	s as listed ab	ove?	
	Yes	☐ No			
		ease provide an attachment ts entered into which obliga			
Signed:	Chief Fis	cal Official	Date:	5-29-08	

Mail completed original application to address shown below. Florida Department of Revenue

Treene Date: June 3,2008

Revenue Accounting Subprocess PO Box 6609 Tallahassee FL 32399-6609

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

Signed: Addie

COUNTY ATTORNEY