



**Resource Management
Agency
COUNTY OF TULARE
AGENDA ITEM**

BOARD OF SUPERVISORS

KUYLER CROCKER
District One
PETE VANDER POEL
District Two
AMY SHUKLIAN
District Three
EDDIE VALERO
District Four
DENNIS TOWNSEND
District Five

AGENDA DATE: November 5, 2019

Public Hearing Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Scheduled Public Hearing w/Clerk	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Published Notice Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Advertised Published Notice	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Meet & Confer Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Electronic file(s) has been sent	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Budget Transfer (Aud 308) attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Personnel Resolution attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Agreements are attached and signature line for Chairman is marked with tab(s)/flag(s)	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
CONTACT PERSON: Celeste Perez PHONE: 559-624-7010				

SUBJECT: Acceptance of the Grant Deed for the Traver Drainage Basin as donated by Self-Help Enterprises

REQUEST(S):
That the Board of Supervisors:

1. Accept the Grant Deed for APN 040-070-014, also known as the Traver Drainage Basin, which is described as Parcel A of Tract 830, in the County of Tulare, State of California, as per Map recorded in Book 43, Page 50 of Maps, Tulare County Records; and
2. Complete and authorize the Chairman of the Board of Supervisors to sign a Certificate of Acceptance and Consent to Record in accordance with Government Code Sections 27231 and 27281; and
3. Authorize and direct the Clerk of the Board to cause the Grant Deed with the Certificate of Acceptance and Consent to Record to be recorded in the Office of the Tulare County Recorder.

SUMMARY:
Assessment District No 14-803-TRAVER (the "Assessment District") was formed in 2014 to pay for storm drainage system maintenance costs within Subdivision Tract No. 830 (the "Subdivision"), located on the northwest corner of Canal Drive and Jacobs Drive in the community of Traver. As part of the Assessment District, the County maintains a drainage basin (the "Basin") on the west side of the subdivision. The property developer for the Subdivision was Self Help Enterprises, who cannot continue to hold the title to the real property now that the development is complete. As such, Self Help Enterprises wishes to donate title to the Basin to the County

SUBJECT: Acceptance of the Grant Deed for the Traver Drainage Basin as donated by Self-Help Enterprises

DATE: November 5, 2019

through a Grant Deed (Attachment B).

The basin was designed to accommodate the drainage for approximately 3.36 acres, which includes a subdivision and the surrounding roadways. The Subdivision consists of 11 residential lots which are assessed annually to cover the maintenance costs.

The County is accepting this property as a donation pursuant to Administrative Regulation 37, as adopted pursuant to the authority of Government Code 25355. The County's ownership of the basin will give the County more flexibility in its use and management of the basin, so long as the County continues to provide drainage and other services as required for the Assessment District.

A Vicinity Map is attached hereto (Attachment A).

FISCAL IMPACT/FINANCING:

No Net County Cost.

Assessment District No 14-803-TRAVER was established to cover the cost to maintain the Basin and the parcel which would be conveyed through this action.

LINKAGE TO THE COUNTY OF TULARE STRATEGIC BUSINESS PLAN:

Safety and Security - The acceptance of the Grant deed for the Traver Drainage Basin will allow for continued improvement and maintenance of the transportation infrastructure for both the general population in the region and motorists.

ADMINISTRATIVE SIGN-OFF:



Reed Schenke, P.E.
Director

cc: County Administrative Office

Attachment(s) Attachment A – Vicinity Map
Attachment B – Grant Deed
Attachment C – Certificate of Acceptance and Consent to Record

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

IN THE MATTER OF ACCEPTANCE OF THE) Resolution No. _____
GRANT DEED FOR THE TRAVER)
DRAINAGE BASIN AS DONATED BY SELF-)
HELP ENTERPRISES)

UPON MOTION OF SUPERVISOR _____, SECONDED BY
SUPERVISOR _____, THE FOLLOWING WAS ADOPTED BY THE
BOARD OF SUPERVISORS, AT AN OFFICIAL MEETING HELD NOVEMBER 5, 2019,
BY THE FOLLOWING VOTE:

AYES:
NOES:
ABSTAIN:
ABSENT:

ATTEST: JASON T. BRITT
COUNTY ADMINISTRATIVE OFFICER/
CLERK, BOARD OF SUPERVISORS

BY: _____
Deputy Clerk

* * * * *

1. Accepted the Grant Deed for APN 040-070-014, also known as the Traver Drainage Basin, which is described as Parcel A of Tact 830, in the County of Tulare, State of California, as per Map recorded in Book 43, Page 50 of Maps, Tulare County Records; and
2. Completed and authorized the Chairman of the Board of Supervisors to sign a Certificate of Acceptance and Consent to Record in accordance with Government Code Sections 27231 and 27281; and
3. Authorized and directed the Clerk of the Board to cause the Grant Deed with the Certificate of Acceptance and Consent to Record to be recorded in the Office of the Tulare County Recorder.

Agenda Item




Attachment A

**Traver Ponding Basin
Vicinity Map**



APN 040-070-014
(Ponding Basin)

Legend

-  Ponding Basin
-  Parcels
-  Traver Community



Agenda Item

Attachment B

Grant Deed

RECORDING REQUESTED BY:
Chicago Title Company

**When Recorded Mail Document
and Tax Statement To:**
County of Tulare
2800 West Burrel Avenue
Visalia, CA 93291

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Escrow Order No.: FWVI-4211800799

Property Address: Parcel A of Tract 830,
Tulare County, CA
APN/Parcel ID(s): 040 070 014 000

GRANT DEED

The undersigned grantor(s) declare(s)

- This transfer is exempt from the documentary transfer tax.
"The value of the property in this conveyance, exclusive of liens and encumbrances is \$100 or less, and there is no additional consideration received by the grantor, R & T 11911."
 The documentary transfer tax is \$_____ and is computed on:
 the full value of the interest or property conveyed.
 the full value less the liens or encumbrances remaining thereon at the time of sale.
The property is located in an Unincorporated area.

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Self-Help Enterprises, a California Non-Profit corporation

hereby **GRANT(S)** to County of Tulare

the following described real property in the Unincorporated Area of the County of Tulare, State of California:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

MAIL TAX STATEMENTS AS DIRECTED ABOVE

GRANT DEED
(continued)

APN/Parcel ID(s): 040 070 014 000

Dated: April 18, 2018

IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

Self-Help Enterprises, a California Non Profit Corporation

BY: [Signature]
Thomas J. Collishaw, President

BY: [Signature]
Elizabeth McGovern Garcia, Asst. Secretary

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of CALIFORNIA

County of TULARE

On 4/18/18 before me, VELMA R. HERNANDEZ, Notary Public,
(here insert name and title of the officer)

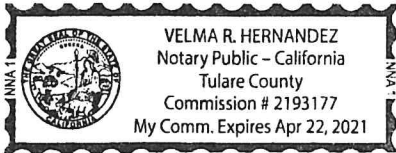
personally appeared THOMAS J. COLLISHAW,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s)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

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]
Signature

(Seal)



CALIFORNIA ALL PURPOSE ACKNOWLEDGEMENT

A notary public completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and no the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA

COUNTY OF TULARE

ON 4/18/18 before me, Velma R. Hernandez, notary public,

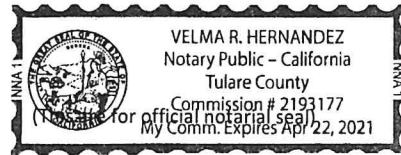
Personally appeared Elizabeth McGovern Garcia

Who 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.

I certify under PENALTY OF PERJURY under the laws of the state of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

Signature Velma R. Hernandez



Optional

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title of Type of Document: _____

Document Date: _____

Number of Pages: _____ (Not including this page)

Signer(s) other Than Named Above: _____

EXHIBIT "A"
Legal Description

For APN/Parcel ID(s): 040 070 014 000

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE UNINCORPORATED AREA IN COUNTY OF TULARE, STATE OF CALIFORNIA AND IS DESCRIBED AS FOLLOWS:

Parcel A of Tract 830, in the County of Tulare, State of California, as per Map recorded in Book 43, Page 50 of Maps, Tulare County Records



ACCOMMODATION RECORDING INSTRUCTIONS

I/We, the undersigned, having a right or duty to cause the following referenced documents to be recorded, hand same to you solely for the purpose of delivering them to the office of the County Recorder of _____ County, _____ for recording, subject to any statutory requirements relative to recordings and such local rules, regulations and requirements as may then be in effect regarding documents tendered for recording.

I/We make no demand, have requested no service, nor have any expectation other than the delivery of said documents as set forth above.

I/We specifically acknowledge that you are NOT abstracting the documents for validity or correctness as to their preparation or execution and that NO representations or assurance are expressed or implied as to the legal effect of said documents.

I/We understand that delivery may be accomplished by a contract messenger or service, U.S. mail, private mail or parcel service or any combination of the above, and we hold you harmless in the event that the documents are lost, misplaced, misdirected, or delayed.

I/We understand that there are no charges for this service other than those levied by the County Recorder and charges which may be incurred by the Company in connection herewith, which charges I/we agree to pay.

DESCRIBE DOCUMENTS BY TYPE OR TITLE AND PARTIES, AND ATTACH COPIES HERETO:

NOTE: As a condition of receiving these documents, it is required that the "When Recorded Mail To" block of said documents be completed with the name and address shown below and that said, address and telephone number be legibly set out so that the County Recorder may contact that party as to any matter affecting said documents.

ACCOMMODATION RECORDING INSTRUCTIONS
(continued)

IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

County of Tulare

BY: _____

Date

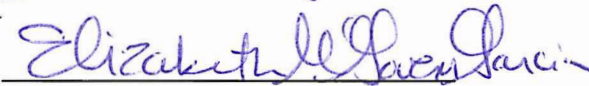
Address: _____

Phone: _____

Self-Help Enterprises, a California Non Profit Corporation

BY:  _____
Thomas J. Collishaw, President

4/18/2018
Date

BY:  _____
Elizabeth McGovern Garcia, Asst. Secretary

4/18/2018
Date

Address: P.O. Box 6520
Visalia, CA 93292

Phone: 559-651-1000

PRELIMINARY CHANGE OF OWNERSHIP REPORT

To be completed by the transferee (buyer) prior to a transfer of subject property, in accordance with section 480.3 of the Revenue and Taxation Code. A Preliminary Change of Ownership Report must be filed with each conveyance in the County Recorder's office for the county where the property is located.

FOR ASSESSOR'S USE ONLY

County of Tulare
2800 West Burrel Avenue
Visalia, CA 93291

ASSESSOR'S PARCEL NUMBER	040 070 014 000
SELLER/TRANSFEROR	Self-Help Enterprises, a California Non Profit Public Benefit Corporation
BUYER'S DAYTIME TELEPHONE NUMBER	()
BUYER'S EMAIL ADDRESS	

STREET ADDRESS OR PHYSICAL LOCATION OF REAL PROPERTY
Parcel A of Tract 830, Tulare County, CA

<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	This property is intended as my principal residence. If YES, please indicate the date of occupancy or intended occupancy.	MO	DAY	YEAR
---	---	----	-----	------

<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Are you a disabled veteran or an unmarried surviving spouse of a disabled veteran who was compensated at 100% by the Department of Veterans Affairs?
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MAIL PROPERTY TAX INFORMATION TO (NAME)
County of Tulare

MAIL PROPERTY TAX INFORMATION TO (ADDRESS) 2800 West Burrel Avenue	CITY Visalia	STATE CA	ZIP CODE 93291
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PART 1. TRANSFER INFORMATION *Please complete all statements.*

This section contains possible exclusions from reassessment for certain types of transfers.

- YES NO A. This transfer is solely between spouses (*addition or removal of a spouse, death of a spouse, divorce settlement, etc.*).
- YES NO B. This transfer is solely between domestic partners currently registered with the California Secretary of State (*addition or removal of a partner, death of a partner, termination settlement, etc.*).
- YES NO * C. This is a transfer: between parent(s) and child(ren) from grandparent(s) to grandchild(ren).
- YES NO * D. This transfer is the result of a cotenant's death. Date of death _____
- YES NO * E. This transaction is to replace a principal residence by a person 55 years of age or older. Within the same county? YES NO
- YES NO * F. This transaction is to replace a principal residence by a person who is severely disabled as defined by Revenue and Taxation Code section 69.5. Within the same county? YES NO
- YES NO G. This transaction is only a correction of the name(s) of the person(s) holding title to the property (*e.g., a name change upon marriage*). If YES, please explain: _____
- YES NO H. The recorded document creates, terminates, or reconveys a lender's interest in the property.
- YES NO I. This transaction is recorded only as a requirement for financing purposes or to create, terminate, or reconvey a security interest (*e.g., cosigner*). If YES, please explain: _____
- YES NO J. The recorded document substitutes a trustee of a trust, mortgage, or other similar document.
- YES NO K. This is a transfer of property:
 - YES NO 1. to/from a revocable trust that may be revoked by the transferor and is for the benefit of the transferor, and/or the transferor's spouse registered domestic partner.
 - YES NO 2. to/from an irrevocable trust for the benefit of the creator/grantor/trustor and/or grantor's/trustor's spouse grantor's/trustor's registered domestic partner.
- YES NO L. This property is subject to a lease with a remaining lease term of 35 years or more including written options.
- YES NO M. This is a transfer between parties in which proportional interests of the transferor(s) and transferee(s) in each and every parcel being transferred remain exactly the same after the transfer.
- YES NO N. This is a transfer subject to subsidized low-income housing requirements with governmentally imposed restrictions, or restrictions imposed by specified nonprofit corporations.
- YES NO * O. This transfer is to the first purchaser of a new building containing an active solar energy system.
- YES NO P. Other. This transfer is to _____

* Please refer to the instructions for Part 1.

Please provide any other information that will help the Assessor understand the nature of the transfer.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

PART 2. OTHER TRANSFER INFORMATION

Check and complete as applicable.

- A. Date of transfer, if other than recording date: _____
- B. Type of transfer:
 - Purchase Foreclosure Gift Trade or exchange Merger, stock, or partnership acquisition (Form BOE-100-B)
 - Contract of sale. Date of contract: _____ Inheritance. Date of death: _____
 - Sale/leaseback Creation of a lease Assignment of a lease Termination of a lease. Date lease began: _____
 - Original term in years (including written options): _____ Remaining term in years (including written options): _____
 - Other. Please explain: Ponding Basin
- C. Only a partial interest in the property was transferred. YES NO If YES, indicate the percentage transferred: _____ %

PART 3. PURCHASE PRICE AND TERMS OF SALE

Check and complete as applicable.

- A. Total purchase price. \$ 0.00
- B. Cash down payment or value of trade or exchange excluding closing costs Amount \$ _____
- C. First deed of trust @ _____ % interest for _____ years. Monthly payment \$ _____ Amount \$ _____
 - FHA (____Discount Points) Cal-Vet VA (____Discount Points) Fixed rate Variable rate
 - Bank/Savings & Loan/Credit Union Loan carried by seller
 - Balloon payment \$ _____ Due date: _____
- D. Second deed of trust @ _____ % interest for _____ years. Monthly payment \$ _____ Amount \$ _____
 - Fixed rate Variable rate Bank/Savings & Loan/Credit Union Loan carried by seller
 - Balloon payment \$ _____ Due date: _____
- E. Was an Improvement Bond or other public financing assumed by the buyer? YES NO Outstanding balance \$ _____
- F. Amount, if any, of real estate commission fees paid by the buyer which are not included in the purchase price \$ _____
- G. The property was purchased: Through real estate broker. Broker name: _____ Phone number: () _____
 - Direct from seller From a family member-Relationship _____
 - Other. Please explain: _____
- H. Please explain any special terms, seller concessions, broker/agent fees waived, financing, and any other information (e.g., buyer assumed the existing loan balance) that would assist the Assessor in the valuation of your property.

PART 4. PROPERTY INFORMATION

Check and complete as applicable.

- A. Type of property transferred
 - Single-family residence Co-op/Own-your-own Manufactured home
 - Multiple-family residence. Number of units: _____ Condominium Unimproved lot
 - Other. Description: (i.e., timber, mineral, water rights, etc.) Timeshare Commercial/Industrial
 - Ponding Basin
- B. YES NO Personal/business property, or incentives, provided by seller to buyer are included in the purchase price. Examples of personal property are furniture, farm equipment, machinery, etc. Examples of incentives are club memberships, etc. Attach list if available.
 - If YES, enter the value of the personal/business property: \$ _____ Incentives \$ _____
- C. YES NO A manufactured home is included in the purchase price.
 - If YES, enter the value attributed to the manufactured home: \$ _____
 - YES NO The manufactured home is subject to local property tax. If NO, enter decal number: _____
- D. YES NO The property produces rental or other income.
 - If YES, the income is from: Lease/rent Contract Mineral rights Other: _____
- E. The condition of the property at the time of sale was: Good Average Fair Poor
 - Please describe: _____

CERTIFICATION

I certify (or declare) that the foregoing and all information herein, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief.

SIGNATURE OF BUYER/TRANSFeree OR CORPORATE OFFICER ▶	DATE	TELEPHONE ()
NAME OF BUYER/TRANSFeree/PERSONAL REPRESENTATIVE/CORPORATE OFFICER (PLEASE PRINT)	TITLE	EMAIL ADDRESS

The Assessor's office may contact you for additional information regarding this transaction.

Agenda Item

Attachment C

Certificate of Acceptance and Consent to

Record

COUNTY OF TULARE
CERTIFICATE AND CONSENT TO RECORD
DEED OR GRANT
(GOVERNMENT CODE SECTION 27281)

GRANTOR (S): Self-Help Enterprises

DATE OF GRANT: April 18, 2018

INTEREST GRANTED: Fee Title

APN: 040-070-014

This is to certify that the interest in real property conveyed by the deed or grant dated April 18th 2018 from Self-Help Enterprises, Inc. to the County of Tulare, a political corporation and/or governmental agency, is hereby accepted by order of the Tulare County Board of Supervisors on November 5, 2019, by the Chairman of the Board on behalf of the Tulare County Board of Supervisors pursuant to authority conferred by resolution of the Tulare County Board of Supervisors adopted on November 5, 2019, and the grantee consents to recordation thereof by its duly authorized officer.

Dated _____ By _____

KUYLER CROCKER, Chairman, Tulare County Board of Supervisors