

**Department of Public Works
Transmittal of Authority for Expenditure Document for
Approval by the Board**

Date: September 26, 2024

To: TJ Knight, Assistant Executive Officer
Board of Public Works

From: BPW-Office of Accounting
For – Bureau of Sanitation

Re: Authority for Expenditure Number: AE 25760977M \$685,440.00

The Department's procedures require that the attached Authority for Expenditure be approved by the Board of Public Works.

Please schedule it on the Board agenda for next meeting.

After approval by the Board, please transmit it to a Commissioner for approval as "Head of Department." The approved document should then be returned to the Office of Accounting for further processing. Please contact the following person for pick-up.

OOA

Attn: Jefferson Eligio

Email: jefferson.eligio@lacity.org or (213) 978-0915

Room 924, City Hall

For additional information on this AE if needed, please call DEBORAH PEOPLES (213) 485-2696

AUTHORITY FOR EXPENDITURE



Dept. PW - LA Sanitation & Environment

DOC CODE GAEAE	DOC DEPT. CD. 50	DOCUMENT ID. TYPE AE F.Y. 25 AUTHORITY NO. 760977M		DOC. DATE M M D D Y Y 07/01/24	ACCTG. PERIOD P P Y Y	BUDGET F.Y. Y Y 25		
ACTION <input checked="" type="checkbox"/> ORIG. ENTRY (E) <input type="checkbox"/> ADJUSTMENT (M)		EVENT TYPE PRAE		VENDOR CODE 100002610		SS OR IRS ID NO.	COMMENTS OR BTRC NO. 0002406447	DOCUMENT TOTAL \$ 685,440.00

TO: (NAME AND ADDRESS)

PLEASE FURNISH TO THE CITY OF LOS ANGELES, CARE OF (GIVE ADDRESS)

STATE WATER RESOURCES CONTROL BOARD
(SWRCB)/FEES - ACCOUNTING OFFICE
P.O. BOX 1888
SACRAMENTO, CA 95812-1888
(916) 341-5247

DONALD C. TILLMAN WATER RECLAMATION PLANT
6100 WOODLEY AVENUE
VAN NUYS, CA 91406

WILL CALL: DAWN JIMENEZ (818) 778-4245

LINE NO. 01	FUND 760	DEPT. 50	APPR. UNIT 50AX82	OBJECT	DOBJ 60230	DESCRIPTION WASTE DISCHARGE FEE						AMOUNT \$ 685,440.00	I/D
QUANTITY		I/D	U.O.M.	UNIT 82012000	M PROJ	PROJECT	ACTIVITY	WORK ORDER S10FPURC	TASK TTT	S/TASK TTT	CHANGE ORDER	FUNCTION	

LINE NO. 02	FUND	DEPT.	APPR. UNIT	OBJECT	DOBJ	DESCRIPTION WASTE DISCHARGE FEE						AMOUNT	I/D
QUANTITY		I/D	U.O.M.	UNIT	M PROJ	PROJECT	ACTIVITY	WORK ORDER S10FPURC	TASK	S/TASK	CHANGE ORDER	FUNCTION	

FOR:

This authority for expenditure will encumber Sewer Construction and Maintenance (SCMO) funds to pay for the annual NPDES and Storm Water fees as required by the State of California - State Water Resources Control Board - A State regulatory agency (Per California Water Code Section 13260). These annual fees are required in order to discharge the processed wastewater produced by the Donald C. Tillman Reclamation Plant, within Council District 6.

This authority is requested for the period covering July 1, 2024 through June 30, 2025. There is no impact to the General Fund. Funds are being encumbered in advance of invoice receipt to ensure timely payment.


Ronald Mayuyu, Division Manager

TO THE OFFICE OF THE CONTROLLER:

PURSUANT TO PROVISIONS OF THE CITY CHARTER AND TO THE ANNUAL DEPARTMENTAL BUDGET APPROPRIATIONS OR OF APPROPRIATIONS MADE SUBSEQUENT TO THE BUDGET. THIS IS AUTHORITY TO ISSUE A DEMAND ON THE FUND AND DEPARTMENT DESCRIBED ABOVE.

OOA RECEIVED 9.19.2024

ORIGINAL/ADJUSTED AUTH. TOTAL

\$ 685,440.00

CONTRACT OR OFFER NO. (STRIKE OUT ONE)

Commissioner 1

Date

DATE


Barbara Romero, Director

DATE
8/13/24

Commissioner 2

CITY ATTORNEY APPROVAL OF AFE OVER \$25,000

DATE

Adena Hopenstand, Deputy City Attorney

9-18-2024

READ THIS CAREFULLY: THIS A.F.E. MUST BE APPROVED FOR FUNDS BY THE CITY CONTROLLER BEFORE SERVICE IS RENDERED. THIS FORM SHALL NOT BE USED FOR THE PURCHASE OF MATERIALS, SUPPLIES OR RENTAL OF EQUIPMENT. INVOICES IN DUPLICATE MUST BE FORWARDED TO THE DEPARTMENT TO WHICH SERVICES WERE RENDERED.

CONTROLLER'S APPROVAL

(1) DOCUMENT NUMBER, NAME AND ADDRESS OF DEPARTMENT MUST APPEAR ON ALL INVOICES.

(2) IN CASE OF A DELAY IN PAYMENT OF INVOICE BEYOND 30 DAYS FOLLOWING THE DATE OF INVOICE, PLEASE NOTIFY THE CONTROLLER IN WRITING GIVING REFERENCE TO A.F.E. NUMBER, AND STATE TO WHAT DEPARTMENT SERVICE WAS RENDERED.

Print

LWO – DEPARTMENTAL DETERMINATION FORM

REQUIRED DOCUMENTATION FOR ALL CONTRACTS

This form will aid Awarding Departments with determining whether or not a contract is subject to the LWO. It must be completed by the AWARDING DEPARTMENT and submitted to the Office of Contract Compliance **AFTER THE CONTRACT HAS BEEN EXECUTED**. **INCOMPLETE SUBMISSIONS WILL BE RETURNED**. Please refer to the endnotes for more details.

AWARDING DEPARTMENT INFO				
Dept: <u>PW/LASAN</u>		Contract Administrator: <u>Rob Tabora</u>		Contact Phone: <u>818-778-4160</u> MS# <u>488</u>
CONTRACT INFO				
Contractor Name: <u>State Water Resources Control Board</u>			Contract # <u>AE25760977A</u>	
Project/Contract Name: <u>SWRCB Fee</u>			Purpose of Contract: <u>SWRCB Fees</u>	
Contract Amount: <u>\$685,440.00</u>		Term: <u>Start Date 07 / 01 / 24</u>	End Date <u>06 / 30 / 25</u>	
SECTION I:				
DETERMINING APPLICABILITY TO LWO				
1	Check off ONE box that best describes the contract, then Continue to #2: This is a <input checked="" type="checkbox"/> New Contract <input type="checkbox"/> Contract Amendment			
2	If you checked off "New Contract" above, SKIP to Question #5 to determine whether this New contract is subject to the LWO.			
3	If you checked off "Contract Amendment" Please answer the following questions about the original contract:			
	a Was the original contract subject to the LWO?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	b Was the original contract approved for an exemption?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, please note what type of exemption it received:	
4	If you checked off YES to 3a OR 3b, THIS FORM IS NOW COMPLETE – PLEASE SUBMIT PAGE 1 ONLY TO OCC . If you checked off NO to 3a AND 3b, Continue to #5 to determine whether this Contract Amendment is subject to the LWO.			
5	Check off ONE box in Parts A, B, C or D below that best describes the contract, then Continue to #6 :			
These are contracts NOT SUBJECT, NOT APPLICABLE to LWO:		These contracts MAY or MAY NOT BE SUBJECT, or MAY or MAY NOT BE APPLICABLE to LWO:		
PART A		PART B	PART C	PART D
<input type="checkbox"/> Service contract that is less than 3 months <u>OR</u> \$25,000 or less ¹ <input checked="" type="checkbox"/> Other governmental entity ² <input type="checkbox"/> Purchase or rental of goods, equipment, property ³ <input type="checkbox"/> Construction contract ⁴ <input type="checkbox"/> Funded by Business Improvement District (BID) assessment money ⁵ <input type="checkbox"/> Financial assistance is below both LWO CFAR thresholds: ⁶ (a) Financial assistance must be less than \$1 Million in a 12-month period <u>AND</u> (b) Is less than \$100,000 if on a continuing basis (such as a loan at a rate lower than the Applicable Federal Rate).		<input type="checkbox"/> Service contract that is at least 3 months AND over \$25,000.	<input type="checkbox"/> Public leases or licenses	<input type="checkbox"/> City Financial Assistance Recipient (CFAR) ⁷
6	If you checked off any box in Part A - THIS FORM IS NOW COMPLETE – PLEASE SUBMIT PAGE 1 ONLY TO OCC .			
7	If you checked off a box in Part B or C, SKIP TO #9 .			
8	If you checked off the box in Part D, SKIP TO #13 .			
9	If you have a service contract, answer questions a, c and d ONLY, then Continue to #10 . If you have a public lease/license, answer questions b, c and d ONLY, then Continue to #10 .			YES NO
	a Are some of the services rendered by employees whose work site is on property owned by the City?			<input type="checkbox"/> <input type="checkbox"/>
	b Are the services rendered on premises at least a portion of which is visited by substantial numbers of the public on a frequent basis (including, but not limited to, airport passenger terminals, parking lots, golf courses, recreational facilities)?			<input type="checkbox"/> <input type="checkbox"/>
	c Could the services feasibly be performed by City employees if the awarding authority had the requisite financial and staffing resources?			<input type="checkbox"/> <input type="checkbox"/>
	d Has the DAA determined in writing that coverage would further the proprietary interests of the City?			<input type="checkbox"/> <input type="checkbox"/>
10	If you checked off ANY boxes in the YES column, this contract is APPLICABLE TO THE LWO (it is SUBJECT). Continue onto SECTION II . Otherwise, continue to #11.			
11	You DID NOT check off ANY boxes in the YES column. This contract is NOT APPLICABLE TO THE LWO (it is NOT SUBJECT). Fill and submit LW-10, OCC Exemption Application for approval prior to contract execution found here: http://bca.lacity.org/index.cfm?nxt=ee&nxt_body=div_occ_lwo_forms.cfm , then Continue to #12 .			
12	Has the exemption been approved? If YES, THIS FORM IS NOW COMPLETE – Once the contract has been executed, SUBMIT LW-1, Page 1 ONLY and the APPROVED EXEMPTION FORM TO OCC . If NO, Continue onto SECTION IV .			
13	Answer the following question to determine whether the CFAR is subject to the LWO, then Continue to #14 .			YES NO
	a Does the agreement intend to promote economic development?			<input type="checkbox"/> <input type="checkbox"/>
14	If you checked off NO this contract is NOT APPLICABLE TO THE LWO (it is NOT SUBJECT). PLEASE SUBMIT PAGE 1 ONLY TO OCC . Otherwise, Continue to Question #15 .			
15	Answer the following questions to determine whether the CFAR is subject to the LWO:			YES NO
	a Is the Financial Assistance given in a 12-month period and above \$1 Million?			<input type="checkbox"/> <input type="checkbox"/>
	b Is the Financial Assistance \$100,000 or more on a continuing basis?			<input type="checkbox"/> <input type="checkbox"/>
16	If you checked off ANY boxes in the YES column, this contract is APPLICABLE TO THE LWO (it is SUBJECT). Continue onto SECTION II . Otherwise, this contract is NOT APPLICABLE TO THE LWO (it is NOT SUBJECT). PLEASE SUBMIT PAGE 1 ONLY TO OCC .			



CITY OF LOS ANGELES

Office of Finance - LATAX Report

ACCOUNT NUMBER

0002406447

LEGAL NAME

CALIFORNIA STATE WATER RESOURCES CONTROL BOARD

TAX STATUS

CLEAR

LOCATION	DBA NAME	LOCATION ADDRESS	STARTED AT LOCATION	END DATE	IN CITY	COUNCIL	EMP ZONE
0001		1001 I ST FL 18TH SACRAMENTO CA 95814 2828	01/30/2009		N	Where no zone is applicable	None
FCC		START OF ACTIVITY					
L049		Professions / Occupations					
		01/30/2009					

Back

New Search



Vendor/Customer

Edit

Cancel

Vendor/Customer: 100002610 | Legal Name: STATE WATER RESOURCES CONTROL BOARD | Alias/DBA: -

Vendor/Customer

Address (33)

Business Type

Service Area

Commodity



Add New Address

Grid Actions



1 - 20 of 33 Records

View per Page - 20 50 100 500

« < Page 1 of 2 > »

	Address ID	Address Type	Street 1	Street 2	
	01	Payment	REDEVELOPMENT PROGRAM	BOX 944212	
	01	Ordering	REDEVELOPMENT PROGRAM	BOX 944212	
	03	Payment	OFFICE OF THE ATTORNEY GENERAL	PO BOX 944255	
	03	Ordering	OFFICE OF THE ATTORNEY GENERAL	PO BOX 944255	
	04	Payment	PO BOX 100	-	
	04	Ordering	PO BOX 100	-	
	05	Payment	SWRCB ACCOUNTING	PO BOX 1888	

Activation Code

Please enter the activation password provided to you by the City of Los Angeles

Confirm Verification

VSS Registered

No

Send Activation Code

Activation Email Address

Requestor Name

No

-

-

Requestor Phone Number

Activation Code

Confirm Activation Code

-

Create Certification Transaction

No

Miscellaneous Account

Internal Account

Inventory Customer

No

No

No

Healthcare Provider

No

PunchOut Enabled

Re-PunchOut Enabled

Electronic Order Enabled

No

No

No

Prevent Transmission of Mod PO

EDI Enabled

Supplier Shared Secret

No

No

Accepts Credit Cards

No

[▶ Show More](#)

▼ Headquarters

Headquarters Account

Headquarters Account Code

Headquarters Account Legal Name

Yes

100002610

STATE WATER RESOURCES CONTROL BOARD

[▶ Show More](#)

▼ Tax Information

Organization Type

1099 Classification

Taxpayer ID Number

Company

Not Applicable



Taxpayer ID Number Type

Detailed TIN Type

1099 Reportable

EIN

-

No

W-9 Received

W-9 Received Date

No

-

Tax Profile

Tax Profile Name

Permanent Staffed Office in State

-

-

No

1042-S Recipient Account Number

1042-S Reportable

1042-S Ch. 3 Recipient Code

-

No

-

1042-S Ch. 4 Status Code

IRS Country of Residence

IRS Country Sub Code

-

-

-

Foreign Tax ID

GIIN

-

-

W-8 Form

W-8 Received

W-8 Received Date

-

No

-

Business Tax Number

Business Tax Compliant

Business Tax Active

0002406447

Yes

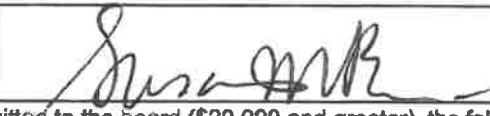
Yes

[▲ Show Less](#)

▼ Additional Information

Sanitation

Commissioner Briefing Form

Authority Number/ LOA Subject Title	AE25760977M WASTE DISCHARGE FEE
Division	820012000
Div Briefing Contact Name	Rob Tabora (818) 778-4160
Vendor	State Water Resources Control Board
Service Description (list complete description below) This authority for expenditure will encumber Sewer Construction and Maintenance funds to pay for the annual NPDES and StormWater fees as required by the State of California - State Water Resources Control Board - A state regulatory agency per California Water Code Section 13260. These annual fees are required in order to discharge to processed wastewater produced by the Donald C. Tillman Reclamation Plant, within Council District 6. Duration of funding: July 01, 2024 to June 30, 2025 Estimated Amount: \$685,440.00	
Director Approval/Date	AUGUST 13, 2024
Date of Briefing	AUGUST 20, 2024
Time of Briefing	11:00 A.M.
Commissioner Name	SUSANA REYES
Commissioner Signature	

* For an AE with LOA attached that will be submitted to the board (\$20,000 and greater), the following language is to be included on the golden rod, "Authorize the President or two members of the Board of Public Works to execute this service agreement"

* All acronyms are to be spelled out

AE must be approved by Director prior to Commissioner Briefing