

JENNY WILSON

Salt Lake County Mayor

ROBIN B. CHALHOUB

Department Director Community Services

VACANT

Division Director Parks & Recreation

June 4, 2024

Salt Lake County Government Center 2001 S State Street Suite S4-700 Salt Lake City, UT 84190 (385) 468-1800

Dear Mayor Wilson:

Salt Lake County Parks & Recreation respectfully requests the Mayor and Council's consideration of the attached fee waiver request from the Alofa Fa'aSamoa organization for the celebration of Samoa Heritage Week. They are requesting use of Southridge Park fields, pavilion, and parking area from July 15-July 21, 2024. The fee waiver request was reviewed by the Parks & Recreation Advisory Board on April 10, 2024. They are now forwarding their favorable recommendation to the County Mayor and Council for final consideration.

The application for fee waiver is attached to this request, along with their 501(c)3 designation by the Internal Revenue Service.

Thank you for your consideration; please contact me if any further information is needed.

Respectfully,

Julie Peck-Dabling Interim Director Parks & Recreation

Cc: Danielle Calacino



APPLICATION FOR FEE WAIVER

NAME OF ORGANIZATION:Alofa Fa'a Samoa
ADDRESS: POBOX 18425
CITY: KLOWS STATE: UT ZIP CODE: 84118
CONTACT PERSON: Laurie Stringham PHONE NUMBER: 8016912031 EMAIL: laurie stringham @g Pasi Ludermanu 719 648 9127
ORGANIZATION OVERVIEW (which could include mission, history, and demographics served):
Hofz Fa'a Samoa is a solc 3 organization that works to preserve the language touture of the Samoan people, + shares it with all cultures here in Utak; We work to unite the island people the communities we live in to bring us together in undustand of each other. We provide education + advancement of ideals to help our people of in American society while still maintaining our identity Have you previously requested a fee waiver from SLCO?
If yes, when and for what facility?
What fees are you requesting be waived? Special Event fee for Southvidge Pork
Fee waiver value \$
Please describe your justification for requesting the fee waiver: . We are in transition, we think that the number of people per doy will increase, but we have not raised as much infundraising as we have in the past. We could use help this year
PLEASE ATTACH:
Copy of 501(c)(3)
Flyer, invitation or event announcement
Copy of independent audit. If you do not have one, please enclose a copy of current financial statements.
The undersigned hereby acknowledges that he or she has authority to bind the organization listed in the applicant. The applicant accepts the following terms and conditions as a condition of receiving and using County funds or the waiver of fees: County funds will be used solely for the purposes approved by the Mayor of Salt Lake County as applied for in this applicant. Any expenditure for purposes other than those approved will require a return of the entire grant amount and may disqualify the applicant from receiving any additional County funds. It is further understood that no grant fund will be made available to any County officer of employee or in violation of the requirements of the Public Employees Ethics Act (67-16-1 et seq.). No grant funds will be used for political or campaign purposes. As a further condition of the grant, all County funds may be subject to an audit as required by Salt Lake County. The grantee is required to complete the Disbursement of Funds Report Form for contributions more than \$2,500.00.
Dated thisday of Applicant June Stranglan



Reservation Request Form

Event Name:	Sama	n Herit	age 1	leek			
Intended Use			J				
Special Event (e.g., race, tournament, festi	Special Event (e.g., race, tournament, festival, reunion, etc.) Athletic Field* (e.g., sports games and programs)						
Park/Field/Location	South	RidgeT	Park				
Specific Area Requested		0 1		a area			
Sponsoring Group/Leagu	e / Sport /Eve	ent: A	lofa Fala	sama.			
Is Sponsoring Group/Leag	gue/Sport/Ev	ent a non-p	rofit? 凇 Yes	□ No_ Fed	deral I.D./Tax	Exempt #	84-306165
Responsible Person	Lau	rie Str	inaham	+ Pas	1 Lucea	manu	0
Address	250. D	sendrop	s Dr.		1		
City	Learns		State	UT	Zip Co	de 84	118
Phone Number	01-699-21	031_Alt	ernate Numb	er	801-41E	7-0987	
E-mail Address:							
Estimated TOTAL Number) .	1	and the state of t		
(If 500 or more people, a					ng Permit is re	equired)	
Start Date July	15 End De	ate <u>Jul</u>	1421	Ev	vent Time	to_	
(Include setup and take down time)	Sun	July 15	Tue	Wed	Thu	Fri	Sat July 20
Start Time	Cleanup	8 Am Setup	Co Am	6 AM	LAM	bam	Gam
End Time	until Park is clean	10pm	10 pm.	10pm	10pm	lOpm	184m-
Group/League/ Sport/Event Description, including Event Name (or attach your event's information sheet)							
Do you plan to set up boo	ths/tents? 🛚	Yes 🗆 1	No How ma	ny? 35	What si	ze? 10 X	0
• Indicate locations on map						•	
Tents over 400 square feet	(or over 700) square fee	t if there are	no sides), red	quire a permi	t from the re	spective city.
Do you plan to set up inflatables? 🛘 Yes 💆 No How many?What size?							
Please describe any other Food Van	set up plans	and include	on man				
Are animals participating					-		
If yes, what kind?				w many?			
Do you require day befor	6	/					
Do you require road closur If yes, which locations?				Ŋ/No			
The following amenities re Bingham Creek Regional Park							



Checklist

Check all that apply: Type:							
🗖 Open to public	☐ Competitive race ☐ Admission charged: How muc						
☐ Walk (non-competitive)	☐ Bicycles used in event						
☐ Will stay on pedestrian walkways and follow pedestrian rules							
Di Other Sporting eu	ents (
Activities:							
☑ Food catering	☐ Food given away ☐ Food prepared on site						
Music/Sound Amplification							
	AOther Food Vendors						
Societies							
Security: Barricades (must obtain private)	oly) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of a constant of the last					
☐ Barricades (must obtain privately) ☐ Off-duty law enforcement officials ☐ Monitors (provided by you for walk/run)							
= Moliners (provided by you for	waik/Tonj						
Miscellaneous:	Ä						
Electrical requirements	🏿 Portable sanita	ry units needed					
🗹 Need for extra garbage cont	ainers 🗆 Animals partici	pating					
 Additional Permits/Certificates i. Proof of liability insurance, in the amount of \$1,000,000.00, must be provided for each event. The certificate of coverage must include Salt Lake County as the certificate holder and listed as being additionally insured. 							
ii. Mass Gathering Permit: For events with 500 or more people, the Salt Lake County Health Department requires a Mass Gathering Permit. Contact them directly at 385-468-3845 or their web site for more information. slco.org/health/special-events							
iii. Bureau of Food Protection: Contact Salt Lake County Health Department at 385-468-3845. For more information, go to their web page at: slco.org/health/food-protection							
iv. Respective city may require a city permit and renter is responsible for obtaining.							
I agree to abide by the parameters within this request, Salt Lake County Parks and Recreation's Patron Standards of Conduct, and all applicable ordinances. This request is not a guarantee of use. If approved, a signed rental contract is required. Signature of Responsible Person Date March 8 2024							
Date 1 10000 Date							

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date:

APR 02 2020

ALOFA FAASAMOA C/O PASITALE F LUPEAMANU 746 E SUNSET VIEW GRANTSVILLE, UT 84029-0000

Employer Identification Number: 84-3061651 DT.N . 26053469002630 Contact Person: ID# 31954 CUSTOMER SERVICE Contact Telephone Number: (877) 829-5500 Accounting Period Ending: September 30 Public Charity Status: 170(b)(1)(A)(vi) Form 990/990-EZ/990-N Required: Yes ____ Effective Date of Exemption: September 11, 2018 Contribution Deductibility:

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Yes

Addendum Applies:

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

ALOFA FAASAMOA

Sincerely,

jotsphen a. marin

Director, Exempt Organizations Rulings and Agreements

ALOFA FA'ASAMOA

Update this Business

Entity Number: 10980892-0140

Company Type: Corporation - Domestic - Non-Profit Address: 746 E SUNSET VIEW RD Grantsville, UT 84029

State of Origin:

Registered Agent: PASITALE F LUPEAMANU

Registered Agent Address:

746 E SUNSET RD Grantsville, UT 84029

View Management Team

Status: Active

Purchase Certificate of Existence

Status: Active as of 11/24/2020

Renew By: 09/30/2021 Status Description: Current

The "Current" stalus represents that a renewal has been filed, within the most recent

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renewal period, with the Division of Corporations and Commercial Code.

Employment Verification: Not Registered with Verify Utah

History

View Filed Documents

Registration Date: 09/11/2018 Last Renewed: 11/24/2020

Additional Information

NAICS Code: 9999 NAICS Title: 9999-Nonclassifiable Establishment

<< Back to Search Results.

Business Name: