

LAFCO

Santa Barbara Local Agency Formation Commission
105 East Anapamu Street ♦ Santa Barbara CA 93101
805/568-3391 ♦ FAX 805/568-2249
www.sblafco.org ♦ lafco@sblafco.org

October 7, 2021 (Agenda)

Local Agency Formation Commission
105 East Anapamu Street
Santa Barbara CA 93101

Section 218 Agreement Final Resolution and Application Agreement

Dear Members of the Commission:

RECOMMENDATION:

It is recommended that the Commission approve the attached final Resolution, Application and Agreement to express its intent to provide a retirement plan and social security coverage for Santa Barbara Local Agency Formation Commission (LAFCO) employees.

DISCUSSION:

On April 1, 2021, the LAFCO Commission approved a resolution to express its intent to provide Social Security coverage for its employees which was the first of six steps. Since then, a plan of procedure/ notice of election - Step 2, and the election – Step 3 have all been completed and can be found in Attachment A. The one LAFCO employee voted in the election to approve the 218 agreement.

Today's action to adopt a final resolution and application agreement confirms Santa Barbara LAFCO's intent to provide both a retirement plan and social security to all employees. Attachment C provides an overview of the six-step process. In order to proceed to steps 5 & 6, the adoption of a final resolution/application agreement authorizing the administrative coverage (Attachment B) is required.

Attachments:

Attachment A: Steps 1, 2, & 3 (completed)

Attachment B: Steps 4 (pending resolution/majority application agreement)

Attachment C: Section 218 Agreement Overview

Please contact the LAFCO office if you have any questions.

Sincerely,

A handwritten signature in blue ink, appearing to read "M. Prater", with a horizontal line extending to the right.

Mike Prater

Executive Officer



Official State Social Security Administrator
California Public Employees' Retirement System

P.O. Box 720720, Sacramento, CA 94229-0720 | Phone: (916) 795-0810 | Fax: (916) 795-3005
888 CalPERS (or 888-225-7377) | TTY: (877) 249-7442 | www.calpers.ca.gov/sssa

March 11, 2021

CalPERS ID No.: 9805227764

Michael Prater
Executive Officer
Santa Barbara Local Agency Formation Commission
105 East Anapamu Street, Room 407
Santa Barbara, CA 93101

Dear Michael Prater,

Thank you for contacting the State Social Security Administrator's Office (State Administrator) regarding Social Security coverage for your agency.

Based on the information provided by the agency in the Coverage Questionnaire, the Santa Barbara Local Agency Formation Commission desires to conduct a majority vote election for employee social security benefits.

In a majority vote election, each employee who is a member of the Santa Barbara County Employees' Retirement System will vote in the election. If a majority of the members vote in favor of Social Security coverage, all employees occupying positions covered under the retirement system will be covered under Social Security, including those who voted "no."

The first step is for the Santa Barbara Local Agency Formation Commission to adopt a resolution to request permission to conduct an election among eligible members of the Santa Barbara County Employees' Retirement System. To do so, please complete and return the enclosed resolution and certification.

These documents should not be modified in any way as only the content included in the documents provided by this office will be accepted.

If you have any questions regarding the enclosed information, call us at (916) 795-0810.
Sincerely,

Veronica Silva-Gil
State Social Security Administrator Program

Enclosures

RESOLUTION LAFCO 21-03

RESOLUTION OF THE SANTA BARBARA LOCAL AGENCY FORMATION COMMISSION MAKING DETERMINATIONS AND APPROVING MAJORITY VOTE ELECTION TO COVER ITS EMPLOYEES FOR SOCIAL SECURITY BENEFITS

WHEREAS, Santa Barbara Local Agency Formation Commission hereinafter designated as "Public Agency", desires to include services performed by its employees in positions covered by Santa Barbara County Employees' Retirement System in the California State Social Security Agreement of March 9, 1951, providing for the coverage of public employees under the old age, survivors, disability and health insurance system established by the Federal Social Security Act, as amended; and

WHEREAS, State and Federal laws require, as a condition of such coverage, that an election first be authorized by the Board of Administration, Public Employees' Retirement System, and conducted among the "eligible employees" (as defined in Section 218(d)(3) of the Social Security Act) of the Public Agency; and

WHEREAS, it is necessary that the "Public Agency" now designate any classes of positions covered by said retirement system which it desires to exclude from coverage under said insurance system;

NOW, THEREFORE, BE IT RESOLVED, that the Board of Administration, Public Employees' Retirement System be, and hereby is requested to authorize the foregoing election; and

BE IT FURTHER RESOLVED, that upon receipt of authorization from the Board of Administration, an election shall be conducted in accordance with the requirements of Section 218(d) of the Social Security Act, and applicable State and Federal laws and regulations; that such election shall be held on the question of whether service in positions covered by said retirement system should be excluded from or included under an agreement under the insurance system established under the Social Security Act, as hereinbefore provided, with such coverage effective as to services performed on and after October 1, 2021; and

BE IT FURTHER RESOLVED, that the following classes of positions covered by said retirement system of the "Public Agency" shall be excluded from coverage under said agreement:

1. All services excluded from coverage under the agreement by Section 218 of the Social Security Act; and
2. Services excluded by option of the Public Agency (**Check a or b; fill in b if checked**):
 - a. No optional exclusions desired.
 - b. Service performed: Elected Officials

BE IT FURTHER RESOLVED, that not less than ninety days' notice of such election be given to all "eligible employees" as hereinabove provided; and that Michael Prater, Executive Officer is hereby designated and appointed to conduct such election on behalf of the "Public Agency" in accordance with law, regulations, and this resolution, including the giving of proper notice thereof to all such "eligible employees"; and

BE IT FURTHER RESOLVED, that with respect to eligible members thereof, the benefits and contributions of the said retirement system shall not be modified in any way and

BE IT FURTHER RESOLVED, that the Public Agency will pay and reimburse the State at such time and in such amounts as may be determined by the State the approximate cost of any and all work and services relating to such election.

Michael Prater
Presiding Officer

Santa Barbara Local Agency Formation Commission
Official Name of Public Agency

4-1-2021
Date

Santa Barbara County Local Agency Formation Commission

By: Etta Waterfield
Etta Waterfield, Chair X

Date: April 1, 2021

ATTEST:

Jacquelyne Alexander
Jacquelyne Alexander, Clerk
Santa Barbara County
Local Agency Formation Commission

CERTIFICATION

I, Michael Prater, Exective Officer of the Santa Barbara Local Agency Formation Commission, State of California, do hereby certify the foregoing to be a full, true, and correct copy of Resolution No. 21-3 adopted by the Commission of the Santa Barbara Local Agency Formation Commission at the regular/special meeting held on the 1st day of April, 2021, as the same appears of record in my office.



Signature

Exective Officer

Title

4/1/21

Date



Official State Social Security Administrator
California Public Employees' Retirement System

P.O. Box 720720, Sacramento, CA 94229-0720 | Phone: (916) 795-0810 | Fax: (916) 795-3005
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May 11, 2021

CalPERS ID: 9805227764

Michael Prater
Executive Officer
Santa Barbara Local Agency Formation Commission
105 East Anapamu Street, Room 407
Santa Barbara, CA 93101

Dear Michael Prater,

Thank you for providing the resolution requesting authorization to conduct a majority vote election for the purposes of entering into an agreement for Social Security coverage for employees of the Santa Barbara Local Agency Formation Commission. The election has been authorized and I have been appointed as the election supervisor on behalf of the state.

The next step in the process is the preparation of the Notice of Majority Vote Election and Statement of Information to be distributed to all eligible members of the Santa Barbara County Employees' Retirement System.

The documents enclosed should not be retyped or modified in any way, as only the content included and provided by this office will be accepted.

Complete and return the Plan of Procedure and Notice of Majority Vote Election. Once you receive approval of these documents, the Notice of Majority Vote Election with the Statement of Information may be distributed to all eligible members. Documents for balloting and the necessary certification forms, etc., will be forwarded to you before the election date.

If you have any questions regarding the enclosed information, call us at (916) 795-0810.

Sincerely,

Trevor Gohl
State Social Security Administrator Program

Enclosures

NOTICE OF MAJORITY VOTE ELECTION OF RETIREMENT SYSTEM

Santa Barbara Local Agency Formation Commission

NOTICE IS HEREBY GIVEN to all persons in employment with the Santa Barbara Local Agency Formation Commission in positions covered by the Santa Barbara County Employees' Retirement System, who are members of such System (or eligible to elect membership therein) on date of this notice, that a majority vote election by secret written ballot will be held on the question:

"Shall eligible employees of the Santa Barbara Local Agency Formation Commission who are members of the Santa Barbara County Employees' Retirement System, except policemen or firemen, have extended to them the Social Security (Old-Age, Survivors, Disability, and Health Insurance) program embodied in the Social Security Act, with coverage under such program effective as to services performed on and after August 20, 2021."

Election date: August 20, 2021. A ballot will be distributed on such date to all eligible members at the polling places and hours designated as follows:

Polling Places: 8484 CARMELITA AVENUE, ATASCADERO, CA 93422

Open at: 9:00 a.m.

Close at: 5:00 p.m.

ABSENTEES: Employees unable to vote and who will not be present on the election date, may file a written application for an absent voter's Majority Vote Ballot with Michael Prater, Executive Officer either in person or by mail, between the dates of August 2, 2021 and August 16, 2021, both dates inclusive. All absent voters' Majority Vote Election Ballots shall be returned to and received in the office of Santa Barbara Local Agency Formation Commission on or before August 20, 2021. Ballots received after that date will not be counted.

MUP T

5-12-21

Signed by Local Election Officer

Date

5-21-21

Notice Date

STATEMENT OF INFORMATION

GENERAL INFORMATION

Your decision whether to be covered by Social Security is important for you and your family. Your age, length of employment, family responsibilities, and any present Social Security credits should all be considered. General information is being provided to help you decide. IT IS INTENDED AS GENERAL INFORMATION AND WE ENCOURAGE YOU TO CONTACT YOUR LOCAL SOCIAL SECURITY OFFICE FOR INFORMATION ABOUT SOCIAL SECURITY BENEFITS.

The term “Employer” or “Agency” means the Santa Barbara Local Agency Formation Commission and “Social Security” means Old-Age, Survivors, Disability, and Health Insurance.

All eligible members of the Santa Barbara County Employees' Retirement System employed by the Agency on the date the coverage procedures are completed will be eligible for any retroactive coverage. Procedures are completed the date the federal government approves the request for coverage.

IMPORTANT: You and your Employer will be required to pay any retroactive social security contributions due on covered wages after the effective date of coverage up to the maximum covered wages for each calendar year in the retroactive period. The lump sum payment for retroactive coverage will be due one month after the end of the calendar quarter in which your Employer is notified the request for coverage has been approved by the Federal Government.

SOCIAL SECURITY INFORMATION

For specific information on Social Security benefits, consult your nearest Social Security Office. We suggest you obtain the booklet, *Understanding Social Security* (Publication No. 05-10024). This and other publications can be obtained free of charge at any Social Security Office or by calling the toll-free number, **1-800-772-1213**.

OTHER INFORMATION

The Social Security Administration and the Health Care Financing Administration (Medicare) produce many publications and factsheets designed to help explain the Social Security programs. The following is a list of some you may find helpful.

Visit the SSA website at www.socialsecurity.gov for more information and publications.

- *Understanding Social Security* (Publication No. 05-10024) – A comprehensive explanation of all the Social Security programs.
- *Retirement* (Publication No. 05-10035) – Explains Social Security retirement benefits.
- *Disability* (Publication No. 05-10029) – Explains Social Security disability benefits.
- *Survivors* (Publication No. 05-10084) – Explains Social Security survivor benefits.
- *Medicare* (Publication No. 05-10043) – Explains the Medicare hospital insurance and medical insurance program.

- *SSI Supplemental Security Income* (Publication No. 05-11000) – Explains the Supplemental Security Income program, which provides a basic income to people 65 or older, disabled, or blind who have limited income and resources.
- *How You Earn Social Security Credits* (Publication No. 05-10072).
- *Your Social Security Earnings Record* (Publication No. 05-10044).
- *How Work Affects Your Social Security Benefits* (Publication No. 05-10069).
- *Government Pension Offset* (Publication No. 05-10007) – For government workers who may be eligible for Social Security benefits on the record of a spouse.
- *A Pension From Work Not Covered By Social Security* (Publication No. 05-10045) – For government workers who are also eligible for their own Social Security benefits.

These and other publications can be obtained free of charge at any Social Security Office or by calling the toll-free number, 1-800-772-1213 between 7 a.m. and 7 p.m.

More Information: If you would like information about the taxation of your Social Security benefits, call or visit your local Internal Revenue Service District Office to ask for a copy of Publication 554, *Tax Information for Older Americans*, and Publication 915, *Social Security Benefits And Equivalent Railroad Retirement Benefits*.

**AUTHORIZATION FOR MAJORITY VOTE ELECTION
FOR PURPOSES OF SOCIAL SECURITY COVERAGE**

A resolution of the Commission of the Santa Barbara Local Agency Formation Commission, complying with regulations of the Board of Administration and requesting a majority vote election of the Santa Barbara County Employees' Retirement System having been filed. I hereby authorize such election pursuant to authority granted by Section 598.63, Title 2, California Code of Regulations. I hereby designate Trevor Gohl to supervise the conduct of such election.

Trevor Gohl
State Social Security Administrator
State Social Security Administrator Program

Date



Official State Social Security Administrator
California Public Employees' Retirement System

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June 22, 2021

CalPERS ID No.: 9805227764

Michael Prater
Executive Officer
Santa Barbara Local Agency Formation Commission
105 East Anapamu Street, Room 407
Santa Barbara, CA 93101

Dear Michael Prater,

Thank you for submitting the Notice of Majority Vote Election and Plan of Procedure relating to the pending Social Security majority election. The documents have been approved. The Notice of Majority Vote Election may be distributed to each eligible member of the retirement system on May 21, 2021 for the election to be held on August 20, 2021 as indicated in the Plan of Procedure.

The next step in the process is for you to prepare and maintain an alphabetical list by last name, of all eligible members including first names and social security numbers. Our office will provide a template via email. The list should be adjusted for new members and terminations up to and including the election date.

To be eligible to receive a notice and statement and participate in the majority election on the date listed above, an employee must be:

1. A member of the Santa Barbara County Employees' Retirement System; and
2. In an employment relationship with the Santa Barbara Local Agency Formation Commission on the Election date, August 20, 2021.

Employees are usually considered in an employment relationship if they are on a leave of absence with the intent to return to work. If your agency does not actually separate the employee, the employee should be given a notice and statement. If an employee receives the notice on May 21, 2021, but is not in an employment relationship on the election date, they will not be eligible to vote.

The Majority Vote Ballot to be used in the election is enclosed.

To proceed with coverage upon completion of the election, you, as the local election officer, must complete and return the following documents certifying the majority election was properly conducted and verifying the voting results:

1. Certification of Majority Vote Election Action form (enclosed)
2. Report on Majority Vote Election – Social Security Coverage (enclosed)
3. All ballots cast in the election

ATTACHMENT A

The documents enclosed should not be modified in any way, as only the content included and provided by this office will be accepted.

If you have any questions regarding the enclosed information, call us at (916) 795-0810.

Sincerely,

Veronica Silva-Gil
State Social Security Administrator Program

Enclosures

STATE OF CALIFORNIA
SOCIAL SECURITY PROGRAM FOR CALIFORNIA PUBLIC AGENCIES
CERTIFICATION OF MAJORITY VOTE ELECTION ACTION

TO: Veronica Silva-Gil, STATE ELECTION SUPERVISOR

This is to certify that:

- (a) A Majority Vote Election by secret written ballot was held on August 20, 2021, on the question of whether services performed by employees of the Santa Barbara County Employees' Retirement System in positions covered by the Santa Barbara County Employees' Retirement System should be excluded from or included in the Social Security (Old-Age, Survivors, Disability, and Health Insurance) program embodied in the Social Security Act;
- (b) An opportunity to vote in such election was given, and was limited to eligible employees (as defined in Section 218 (d) (3) of such Act);
- (c) Not less than 90 days' notice of election was given to all such eligible employees;
- (d) The vote was conducted under the supervision of the undersigned, duly designated by the Governing Body of the Agency as the election officer;
- (e) A majority of the eligible employees voted in favor of including service in positions covered by said retirement system under section 218(d) of the federal Social Security Act; and
- (f) With respect to such election, the conditions specified in Section 218(d) of the Social Security Act have been met, and that the protection afforded employees of the Agency in positions covered by the System, as well as those receiving periodic benefits under such retirement system will not be impaired as a result of making an agreement bringing such employees under Social Security.

Done this 20 day of AUGUST, 2021



Signed by Local Election Officer

TO: CalPERS - State Social Security Administrator Program
P.O. Box 720720
Sacramento, CA 94229-0720

REPORT ON MAJORITY VOTE ELECTION – SOCIAL SECURITY COVERAGE

The following results were obtained upon division of the Santa Barbara County Employees' Retirement System as it applies to employees of the Santa Barbara Local Agency Formation Commission on August 20, 2021 for the purposes of Social Security coverage:

Total number of eligible voters:		<u>1</u>
Total Yes votes cast:	<u>1</u>	
Total No votes cast:	<u>0</u>	
Total votes not cast (count as No votes):	<u>0</u>	
Total number of all votes ¹ cast and not cast:		<u>1</u>

Local Election Officer

MIKE PRATER
Name – Please Print

MJPT-
Signature

EXECUTIVE OFFICIER
Title

8-20-21
Date

¹ The total number of all votes cast and not cast should equal the total number of eligible voters.

Santa Barbara Local Agency Formation Commission

OFFICIAL MAJORITY VOTE ELECTION BALLOT

SOCIAL SECURITY COVERAGE

INSTRUCTIONSTO VOTERS:

To vote on the question below, mark X in the voting square after the word "YES" or the word "NO". All other marks are forbidden and void the ballot.

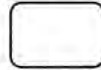
QUESTION:

Shall eligible employees of the Santa Barbara Local Agency Formation Commission who are members of the Santa Barbara County Employees' Retirement System have extended to them the Social Security (Old-Age, Survivors, Disability, and Health Insurance) program embodied in the Social Security Act, with coverage under such program effective as to services performed on and after October 1, 2021?

YES



NO





Official State Social Security Administrator
California Public Employees' Retirement System

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September 16, 2021

CalPERS ID No.: 9805227764

Michael Prater
Executive Officer
Santa Barbara Local Agency Formation Commission
105 East Anapamu Street, Room 407
Santa Barbara, CA 93101

Dear Michael Prater,

Thank you submitting the Social Security majority vote election ballots and certification.

The next step is the adoption of the Resolution authorizing execution of the Application and Agreement for Social Security coverage for employees of the Santa Barbara Local Agency Formation Commission who are members of the Santa Barbara County Employees' Retirement System. We have enclosed a partially completed Resolution, and Application and Agreement. The forms contain the terms of coverage indicated in the Resolution adopted by the Commission of the Santa Barbara Local Agency Formation Commission. Michael Prater, as Authorized Agent, should sign all copies of the enclosed Application and Agreement. The original and one copy of the adopted certified Resolution and the original and one copy of the signed Application and Agreement should be returned to this office.

Upon receipt of the above, we will request the Federal Government to include the Santa Barbara Local Agency Formation Commission in the Social Security program.

These documents should not be modified in any way, as only the content included in the documents provided by this office will be accepted.

If you have any questions regarding the enclosed information, call us at (916) 795-0810.

Sincerely,

Veronica Silva-Gil
State Social Security Administrator Program

Enclosures

RESOLUTION NO.
(To Accompany Application and Agreement)

WHEREAS, a majority of the eligible employees of the Santa Barbara Local Agency Formation Commission, hereinafter referred to as "Public Agency", who are members of and in positions covered by the Santa Barbara County Employees' Retirement System; at a majority vote election conducted in accordance with the provisions of Part 4, Division 5, of Title 2 of the California Government Code, Section 218 of the Federal Social Security Act, and regulations promulgated by the Board of Administration of the California Public Employees' Retirement System, hereinafter referred to as "State," voted in favor of coverage under the provisions of the Old-Age, Survivors, Disability and Health Insurance system established by the Federal Social Security Act; and

WHEREAS, the Public Agency desires to file an application with the State and to enter into an agreement with the State to extend to such retirement system members and to other eligible employees of the Public Agency in the same coverage group, as defined in Section 218(d)(4) of the Federal Social Security Act, coverage under the said insurance system on behalf of the Public Agency; and

WHEREAS, official form "Application and Agreement" containing the terms and conditions under which the State will affect such inclusion has been examined by this body;

NOW, THEREFORE, BE IT RESOLVED, that said Application and Agreement on said official form be executed on behalf of the Public Agency and submitted to the State to provide coverage under the California State Social Security Agreement of March 9, 1951, of all services performed by individuals as employees of the Public Agency as members of a coverage group (as defined in Section 218(d)(4) of the Social Security Act) of the Santa Barbara County Employees' Retirement System, except the following:

1. All services excluded from coverage under the agreement by Section 218 of the Social Security Act; and
2. Services excluded by option of the Applicant as indicated in Resolution No. 21-03 adopted at a meeting of the Santa Barbara Local Agency Formation Commission on April 1, 2021: Elected Officials.

Effective date of coverage of services under said agreement to be October 1, 2021; and

BE IT FURTHER RESOLVED, that Michael Prater, Executive Officer, 105 East Anapamu Street, Room 407, Santa Barbara, CA 93101, is hereby authorized and directed to execute said Application and Agreement on behalf of and as Authorized Agent of the Public Agency and to forward same to the State for acceptance and further action; and

BE IT FURTHER RESOLVED, that authority hereafter to act as Authorized Agent, and so to conduct all negotiations, conclude all arrangements, submit all reports, and sign all agreements and instruments which may be necessary to carry out the letter and intent of the aforesaid application and agreement, in conformity with all applicable Federal and State laws, rules and regulations, is vested in the position of Executive Officer.

Santa Barbara Local Agency Formation Commission

Presiding Officer

Executive Officer

Date

CERTIFICATION

I, Michael Prater, Executive Officer of the Santa Barbara Local Agency Formation Commission, State of California, do hereby certify the foregoing to be a full, true, and correct copy of Resolution No. _____ adopted by the Commission of the Santa Barbara Local Agency Formation Commission at the regular/special meeting held on the 7th day of October, 2021, as the same appears of record in my office.

Signature

Title

Date

APPLICATION AND AGREEMENT

For the purposes of this application and agreement, any reference made herein to any State or Federal statute or statutes, or regulations, or part thereof, applies to all amendments thereto now or hereafter made.

For the purposes of this application and agreement, "Federal System" means Old-Age, Survivors, and Disability and Health Insurance system established by the Federal Social Security Act, "Federal agency" means the Commissioner of Social Security, or successor in function to such officer, "Board" means the Board of Administration of the Public Employees' Retirement System, acting on behalf of the State of California.

The Santa Barbara Local Agency Formation Commission, a public agency as defined in Section 22009 of the Government Code* hereinafter called Applicant, hereby makes application to the Board to execute a modification to the California State Social Security Agreement extending thereunder the Federal System to all services performed by individuals as employees of the Applicant in a coverage group as defined in Section 218(d)(4) of the Social Security Act* of the Santa Barbara County Employees' Retirement System, a deemed retirement system except the following:

1. Those services mandatorily excluded from said agreement by Section 218 of the Social Security Act. *
2. The following services excluded by option of the Applicant pursuant to Resolution No. 21-03, adopted on April 1, 2021:

Elected Officials

*See Attachment

In order to carry into effect, the common governmental duties under such statutes and in consideration of the mutual promises hereinafter made, the Applicant and the Board agree as follows:

1. The Board will execute a modification to the California State Social Security Agreement to extend thereunder the Federal System to the services of employees of Applicant as hereinbefore applied for.
2. Applicant will comply promptly and completely, throughout the term of this application and agreement, with the letter and intent of all statutes of the State of California, and Section 218 of the Federal Social Security Act, and applicable Federal and State regulations adopted pursuant thereto.
3. Applicant shall pay to the Federal Government amounts equivalent to the sum of taxes (employer-employee contributions) imposed under the Federal Insurance Contributions Act if the services of employees covered by the application and agreement constituted employment as defined in such Act. Applicant shall keep or cause to be kept accurate records of all remuneration for such services, said records to be maintained as required by Federal or State regulations, and said records shall be available for inspection or audit by the Board or its designated representative.
4. Applicant will prepare and submit such wage reports as may be required.

5. Applicant shall pay and reimburse the State at such times as may be determined by the State:
 - (a) Any sums of money that the State may be obligated to pay or forfeit to the Federal Government by reason of any failure of the Applicant, for any cause or reason, to pay the contributions, penalties, or interest required by the agreement between the Federal agency and the State at such time or in such amounts as required by the said agreement and any State or Federal regulations adopted pursuant thereto.
 - (b) In such amounts, as may be determined by the State, its proportionate share of any and all costs incurred by the State in the administration of the Federal System as it affects the Applicant and its employees.
 - (c) In such amounts, as may be determined by the State, the cost of any and all work and services relating to the election for the purposes of coverage under the Federal System held with respect to the coverage group for which coverage under the Federal System is requested herein.
 - (d) In such amounts, as may be determined by the State, the costs of any audits of the books and records of the Applicant made by the State or its designated representatives pursuant to Section 22559 of the Government Code.
6. The coverage herein provided for shall be effective October 1, 2021.
7. That, subject to the aforesaid provisions and applicable law, this application and agreement may be amended by the mutual consent of the parties in writing.

8. After the filing of this application and agreement, its acceptance and execution by the State shall constitute it a binding agreement between the Applicant and the State of California with respect to the matters herein set forth.

Santa Barbara Local Agency Formation Commission

Signed by:

Authorized Agent

And by:

Witness

Title

Date

ACCEPTED: _____

STATE OF CALIFORNIA
BOARD OF ADMINISTRATION
CALIFORNIA PUBLIC EMPLOYEES' RETIREMENT SYSTEM

BY _____
Veronica Silva-Gil
State Social Security Administrator
State Social Security Administrator Program

ATTACHMENT

Section 22009, Government Code:

"Public Agency" means the State, any city, county, city and county, district, municipal or public corporation or any instrumentality thereof, or boards and committees established under Chapter 10 of Division 6 of the Agricultural Code, Chapter 754 of Statutes of 1933, as amended, or Chapter 307 of the Statutes of 1935, as amended, the employees of which constitute one or more coverage groups or retirement system coverage groups.

Section 218(d)(4):

For the purposes of subsection (c) of this section, the following employees shall be deemed to be a separate coverage group:

- (A) all employees in positions which were covered by the same retirement system on the date the agreement was made applicable to such system (other than employees to whose services the agreement already applied on such date);
- (B) all employees in positions which became covered by such system at any time after such date; and
- (C) all employees in positions which were covered by such system at any time before such date and to whose services the insurance system established by this title has not been extended before such date because the positions were covered by such retirement system - including employees to whose services the agreement was not applicable on such date because such services were excluded pursuant to subsection (c)(3)(B).

The following services are mandatorily excluded:

- (a) service performed in a policeman's or fireman's position, covered by a retirement system at the time coverage is extended to the Public Agency;
- (b) service performed by an individual who is employed to relieve him from unemployment;
- (c) service performed in a hospital, home, or other institution by a patient or inmate thereof;
- (d) covered transportation service (as defined in Section 210(k) of the Social Security Act, as amended);

- (e) service (other than agricultural labor or service performed by a student) which is excluded from employment by any provision of Section 210(a) of the Social Security Act, other than paragraph 7 of such section, or service the remuneration for which is excluded from wages by paragraph (2) of Section 209(h);
- (f) service performed by an individual as an employee on a temporary basis in case of fire, storm, snow, earthquake, or similar emergency;
- (g) services performed by election officials or election workers for each calendar year in which the remuneration paid for such service is less than the threshold amount mandated by law.



Official State Social Security Administrator
California Public Employees' Retirement System

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Section 218 Agreement Overview

The process is a six-step process and could take anywhere from 18 to 24 months. The fee for this process is \$650. Our office provides the agency with an information packet and a questionnaire.

The agency completes the questionnaire, then the agency decides what type of vote the agency will be providing to the eligible employees.

The two options for the election are:

Majority: if the majority of the employees vote YES then the agency can proceed with the contract and ALL of the eligible employees would be covered including new hires. If the majority of the employees vote NO, then the process stops – a new election could be held 12 months later.

Division: Employees who vote YES will receive Social Security coverage, those who vote NO will not receive the coverage; future hires would get the coverage.

Step 1: The agency adopts a resolution with their governing board to express their intent to provide Social Security coverage for its employees.

Step 2: The agency creates a plan of procedure: Choose the date when the notice of election will be given to the employees, no less than 90 days later our office supervises the election.

In between the notice date and the election date our office, along with the Social Security Administration offers an informational session about Social Security benefits and the election process.

Step 3: Election – We supervise the election.

Step 4: The agency adopts a final resolution and signs the Agreement that we will provide.

**** At any time, before and including this step the agency can choose to cancel the process. Once we deliver the documents to the Social Security Administration, the agency cannot request for the process to be cancelled.

Step 5: Our office forwards the signed Agreement and all of the documents from the steps above to the Social Security Administration. The Social Security Administration provides a response within 12-24 months

Step 6: Our office notifies the agency the Social Security Administration's decision.

The agency's retirement agreement may need to be amended to reflect that the agency is now offering Social Security benefits, after the Social Security Agreement is finalized.