



AGENDA ITEM

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Meeting Date
08/12/08

Requested Action	(Identify appropriate Action or Motion, Authority or Requirement for Item and identify the outcome and/or purpose of item.)
<u>2:00 P.M. PUBLIC HEARING</u>	
MOTION TO CONSIDER the enactment of an Ordinance, the title of which is as follows:	
<p>AN ORDINANCE OF THE BOARD OF COUNTY COMMISSIONERS OF BROWARD COUNTY, FLORIDA, RELATING TO RETAIL ESTABLISHMENTS; ADDING SECTIONS TO CHAPTER 21 OF THE BROWARD COUNTY CODE OF ORDINANCES CREATING THE RETAIL ESTABLISHMENT PARKING SECURITY ORDINANCE; PROVIDING FINDINGS; DEFINING "RETAIL ESTABLISHMENT" AND "RETAIL ESTABLISHMENT PARKING AREA"; PROVIDING FOR APPLICABILITY THROUGHOUT BROWARD COUNTY; REQUIRING CERTAIN RETAIL ESTABLISHMENT PARKING AREAS TO BE EQUIPPED WITH SPECIFIC SECURITY DEVICES; PROVIDING FOR COMPLIANCE DATES; PROVIDING FOR LICENSES; PROVIDING FOR ENFORCEMENT; AMENDING SUBSECTION 8½-16(f) OF THE BROWARD COUNTY CODE OF ORDINANCES TO PROVIDE CIVIL PENALTIES; PROVIDING FOR SEVERABILITY; PROVIDING FOR INCLUSION IN THE CODE; AND PROVIDING FOR AN EFFECTIVE DATE.</p>	
(Sponsored by Commissioner Josephus Eggelletion, Jr.)	
Why Action is Necessary:	Resolution directing the County Administrator to publish notice of public hearing to consider enactment of the Ordinance was adopted by the Board of County Commissioners at its Commission meeting of June 24, 2008.
What Action Accomplishes:	Deters persons from committing crimes at or against retail establishments, and to protect retail establishment employees and the public from criminal activity.
Is this Action Goal Related?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous Item		Scheduling
(Signature confirms that required approvals from other agencies have been received – e.g. Purchasing, Budget, Risk Mgmt, Attorney)		County Admin initials
Signature:	Date:	Type: Name, Title, Agency, and Phone
		Jeffrey J. Newton County Attorney 954-357-7600
Source of additional information: Type Name, Agency, and Phone		
A. Denise Sagerholm, Assistant County Attorney, 954-357-7600		

Summary Explanation/Background	(The first sentence includes the Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item. Identify how item meets Commission Challenge Goal.)
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Not applicable.

Fiscal Impact/Cost Summary	(Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.)
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Fiscal Impact Statement by Office of Management and Budget attached as Exhibit 2.

Exhibits Attached <small>(copies of original agreements)</small>	(Please number exhibits consecutively.)
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Exhibit 1 - Copy of Proposed Ordinance
 Exhibit 2 - Copy of Fiscal Impact Statement

Document Control	Commission Action
_____ Executed original(s) for permanent record <small>(Number)</small>	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
_____ Executed copies return to: <small>(Number)</small>	<input type="checkbox"/> DEFERRED
Other instructions (Include name, agency, and phone) Original Ordinance	From: _____ To: _____