

BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA

RESOLUTION NO. _____

On the motion of Supervisor:
Duly seconded by Supervisor:

The following resolution is adopted:

RESOLUTION CONFIRMING BENEFIT ASSESSMENT/SERVICE CHARGE
REPORTS FOR THE 2025-26 FISCAL YEAR
FOR VARIOUS COUNTY SERVICE AREAS

WHEREAS, on April 8, 2025, the Board of Supervisors held a duly noticed public hearing on the 2025-26 benefit assessment/service charge reports for benefit assessment/service charges proposed within the following County Service Areas:

9 Highway Safety Lighting	35 Country Estates
9A Residential Lighting	36 Forest Glen
9C Disposal Site	37 Roberts Road
9D 1-3, Road Repair	39 Reed Street
9E Streetscape	40 Ralston Way
13 Hutchinson Road	41 Loma Prieta Drive
13A Oak Flat Road	42 Sunlit Lane
15 Huckleberry Woods	43 Bonita Encino
16 Robak Drive	44 Sunbeam Woods
18 Whitehouse Canyon	47 Braemoor Drive
21 Westdale Drive	50 The Vineyard
22 Kelly Hill Road	51 Hopkins Gulch
23 Old Ranch Road	52 Upper Pleasant Valley
24 Pineridge	55 Riverdale Park
26 Hidden Valley	56 Felton Grove
28 Lomond Terrace	57 Graham Hill
30 Glenwood Acres	58 Ridge Drive
33 Redwood Drive	59 McGaffigan Mill Road,
34 Larsen Road	

WHEREAS, the Board has determined that no protests have been submitted or that all protests should be overruled; and

Resolution _____

WHEREAS, the Board has determined that the benefit assessment/service charge reports should be confirmed as submitted/amended.

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the benefits assessment/service charge reports for various County Service Areas for the 2025-26 fiscal year are hereby confirmed, and such benefit assessments/service charges are authorized to be collected as provided in Chapter 4.26 of the Santa Cruz County Code.

BE IT FURTHER RESOLVED AND ORDERED that the Clerk of this Board shall file a copy of this resolution and reports with the County Auditor on or before August 10, 2025.

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Cruz, State of California, this _____ day of _____, 20____, by the following vote:


AYES:
NOES:
ABSENT:
ABSTAIN:

Chair of the Board of Supervisors

ATTEST: _____

Clerk of the Board

Approved as to Form:

Signed by:
 4/23/2025
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Office of the County Counsel

Certificate Of Completion

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Christine Hicks

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Approved as to Form by District Counsel

Santa Cruz County Sanitation District

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Michael de Smidt

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