



7. Type and amount of fee waiver/sponsorship requested. Please list all County fees you are requesting be waived/sponsored in conjunction with this project/activity/event. Please attach a copy of an estimate or receipt from the County Department or Veteran's Building Operator documenting the amount of each fee you are requesting be waived/sponsored.

Department Assessing Fee	Type of Fee	Amount of Fee
Department of Health Services	3R21- Food- Extensive Preparation	\$1,938.00

8. If your Community Based Organization, Non-Profit, or Governmental Agency has received a fee waiver/sponsorship for a similar project/activity/event in the past, please list below:

Date of Fee Waiver	Department Assessing Fee	Type of Fee	Amount of Fee
4 / 22 / 2025	Dept of Health Services	3R21- Food- Extensive Preparation	\$1,938.00
4 / 30 / 2024	Dept of Health Services	3R21- Food- Extensive Pre	\$1,789.00
4 / 19 / 2022	Dept of Health Services	3R21- Food- Extensive Pre	\$1,255.00
/ /			


9. Does the organization or agency for which the fee waiver/sponsorship is requested receive funding from any of the following sources? If so, please specify:

- Property Tax
  Sales Tax
  Special Assessment
   
 User Fees

Other (please specify): \_\_\_\_\_

10. If you checked any of the boxes in number 9 above, please provide an explanation and supporting documentation regarding the inability of the organization or agency to pay the fees which you are requesting be waived/sponsored. Please attach to this form and submit with your request.

11. Will the organization or agency be charging an entry fee or be requesting a donation for the project/activity/event for which you are requesting a fee waiver/sponsorship? If so, please provide an explanation detailing why the fees to be waived/sponsored cannot be recovered through the entry fee. Please attach to this form and submit with your request.

  
 \_\_\_\_\_  
 Authorized Signature  
 3 10/2026  
 \_\_\_\_\_  
 Date

Executive Director  
 \_\_\_\_\_  
 Title



March 6, 2026

**Board of Supervisors**

575 Administration Dr, Ste 100A  
Santa Rosa, CA 95403

Dear Lynda Hopkins and Members of the Board of Supervisors,

I hope this letter finds you well. I am writing on behalf of the Sebastopol Area Senior Center to express our gratitude for the Board's past approval of our food permit fee waiver. We deeply appreciate your support and hope you will consider our request again for 2026 (formal application attached).

I am formally requesting a fee waiver for our food permit for the Harvest Café, which provides free and low-cost meals to seniors, their caregivers, and community members. As a nonprofit dedicated to supporting the well-being of older adults, we strive to keep costs as low as possible, charging only \$10 for a hearty lunch that includes a starter, entrée, and drink. **No one is ever turned away due to an inability to pay.**

This year, we are on track to **serve more than 10,000 meals** to seniors, caregivers, and others in need. While we recognize the importance of food permits in ensuring safety and quality, the financial constraints we face make it difficult to cover the associated fees. A waiver would significantly ease this burden, allowing us to continue providing nutritious meals to those who rely on us.

Thank you for your time and consideration. We greatly value our partnership with the County and appreciate your support in helping us serve our community.

Sincerely,

Katie Davis  
Executive Director

STAFF

<i>Executive Director</i>	Katie Davis
<i>Director of Operations</i>	Hillary Werhane
<i>Programs Manager</i>	Marlo Carreno
<i>Accounting Manager</i>	Lisa Mathiesen
<i>Volunteer Engagement</i>	Julie Campagna
<i>Harvest Café</i>	Clint Gandy
<i>The Legacy</i>	Brittany Roney
<i>LGBT Programs</i>	Scotty King
<i>Reception &amp; Resources</i>	Emily Topai

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