#### SAN BERNARDINO MUNICIPAL WATER DEPARTMENT

POLICIES & PROCEDURES MANUAL

POLICY 20.100 - NAMING OF SAN BERNARDINO MUNICIPAL WATER DEPARTMENT PROPERTIES AND FACILITIES

Date: August 24, 2021

Revision No: 2

Supersedes: July 9, 2019
First Adopted: December 6, 2011

#### PURPOSE:

To establish guidelines and a uniform policy for naming or amending the name of Department owned properties. This policy shall apply to all Department owned properties or facilities including any properties and/or facilities leased to the City of San Bernardino.

### POLICY:

- 1. Recommendations shall be submitted in writing to the General Manager's Office on the approved Nomination Form (Attachment A).
- 2. Recommendations shall be given equal consideration without regard to the source of the nomination.
- 3. The Nomination Form shall be considered at a publicly noticed meeting of the Water Board which shall exercise the final authority with regard to the naming.
- 4. The naming of any Department facility is intended to be an act in perpetuity. Facilities already bearing the name of an individual shall not be considered for re-naming in order to uphold the original intent of honor and respect unless substantial evidence supports finding that the individual was falsely credited with the honor for which the facility was named, or that the name now tarnishes the good name of the City of San Bernardino and/or the Department. Any such cause for renaming shall be referred to the General Manager's office where such evidence shall be evaluated before the request is referred to the Water Board.
- 5. The Water Board must approve the naming/renaming of any Department owned properties or facilities including those leased by the City of San Bernardino.

## SELECTION CRITERIA

- 1. The name of an identifiable geographic location or a name that provides a link to City, County, State, or National heritage or development shall be used whenever possible; preferably a link to water/wastewater in the City.
- 2. The name of an individual may be used, living or dead, provided that individual has contributed significantly to the quality of life for San Bernardino residents through 20 years or more community service. The individual must be identified as a City of San Bernardino resident, a member of a San Bernardino service organization, or employed within the City during his/her community or public service. Preference will be given to those with some nexus to water/wastewater.
- 3. The name of a Department employee may be used, regardless of length of service, if performance of service caused, or significantly contributed to the death, serious illness, or disability of said employee; or if said employee performed pioneering measures on behalf of the Department or positive contributions to water/wastewater in the area.
- 4. The Department shall not name any facility in honor of an individual or organization which promotes, supports, or produces products which may be detrimental to the public health, safety or well-being, or which are not intended for consumption or use by minors.
- 5. The Department shall not use any term in the name of a facility that is derogatory or offensive to a specific race, nationality, religious group, etc., or any other protected class.
- 6. The Water Board shall exercise final authority in the naming of all Department properties and facilities.

## PROCESS:

- 1. The General Manager, or his/her designee, shall verify the information on the Nomination Form, and refer such requests to the Water Board.
- 2. In accordance with the selection criteria stated in this policy, the Water Board shall consider each submitted request in a public meeting.
- 3. Department staff shall prepare the necessary documents (Resolution, Staff Report, etc.) to present the recommendation to the Water Board for final approval.

# Policy Review

7/2018
7/9/2019
7/2020
8/24/2021
7/2022
7/2023
7/2024

# **ATTACHMENT A**

# San Bernardino Municipal Water Department

NOMINATION FORM FOR THE NAMING OF DEPARTMENT PROPERTIES AND FACILITIES

1.	Nominator Name:
2.	Address:
3.	PHONE (DAYTIME): CELLPHONE:
4.	EMAIL ADDRESS:
5.	WHAT GROUP (IF ANY) DOES THE NOMINATOR REPRESENT:
6.	RECOMMENDED SITE & LOCATION:
7.	Is this property/facility named? If yes, please state:
8.	RECOMMENDED NAME:
9.	PLEASE DISCUSS THE REASON FOR THIS NOMINATION AS IT RELATES TO CRITERIA IN POLICY (ADDITIONAL SUPPORTIVE INFORMATION, PHOTOS, OR ARTICLES MAY BE ATTACHED):

Policy 20.100 Namin Facilities	ng of San Bernardino Muni	cipal Water	Department	Properties and Page 5 of
SUBMIT FORM TO:	OFFICE OF THE GENERAL	MANACED		
SOBMIT FORM TO.	397 CHANDLER PLACE	LIVIANAGER		
	SAN BERNARDINO, CA 924	108		
	(909)384-5091			
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	AND READ A COPY OF OPERTY AND FACILITY NAM			
THE CRITERIA AS C	OUTLINED IN THE POLICY.	THE STATE		
DOCUMENT ARE TR	UE, TO THE BEST OF MY K	NOWLEDGE.		
Crant mare a No.		<u>—</u>		Dim
SIGNATURE OF NOM	IINATOR			DATE