Monterey County Board of Supervisors Referral Submittal Form

Referral No. 2025.11 Assignment Date: 09/16/25 (Completed by CAO's Office)

SUBMITTAL - Completed by referring Board office and returned to CAO no later than 10:00AM on Wednesday prior to Board meeting:

Date: 5 Sept. 2025 Submitted By: Su	pervisor Gle	nn Church		District #: 2	
Referral Title: No Recreational Vehicle Parking on Railroad Avenue in Pajaro					
Referral Purpose: Request for the Board of Supervisors to consider adoption of an ordinance to prohibit recreational vehicle parking on the entirety of Railroad Avenue in the unincorporated area of the County of Monterey and establish a towaway zone, authorizing the immediate removal of vehicles that violate this no-parking restriction.					
Brief Referral Description (attach additional sheet as required):					
Homeless individuals are living in recreational vehicles along this road without appropriate services. These individuals park a variety of vehicles, including motor homes, campers and trailers, to sleep and live in. The uncontrolled use of the road for this purpose has resulted in serious disruptions for residents and businesses as well as health and safety problems, including crime, blocking of travel lanes and dumping of trash and refuse.					
Classification - Implication		Mode of Response			
☐ Ministerial / Minor		☐ Memo	☐ Memo X Board Report ☐ Presentation		
X Land Use Policy			Requested Response Timeline		
□ Social Policy		\square 2 weeks X 1 month \square 6 weeks			
☐ Budget Policy		☐ Status reports until completed			
☐ Other:		☐ Other: A	☐ Other: ASAP ☐ Specific Date:		
ASSIGNMENT – Provided by CAO at Board Meeting. Copied to Board Offices and Department Head(s) Completed by CAO's Office:					
Department(s): PWFP Referral Lea		Lead: Randy Ishii Boa		Board Date: 09/16/25	
REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by CAO's Office:					
Department(s): Referral Lo		Lead: Dat		Date:	
ANALYSIS - Completed by Department and copied to Board Offices and CAO:					
Department analysis of resources required/impact on existing department priorities to complete referral:					
Analysis Completed By: Department's Recommended Response Timeline					
By requested date					
			\square 2 weeks \square 1 month \square 6 weeks \square 6 months		
Date:		□ 1 year	1 year Other/Specific Date:		
REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:					
Referral Response Date:	Board Item No.:		Referrals List Deletion:		

Note: Please cc Claudia Escalante and Karina Bokanovich on all CAO correspondence relating to referrals.