## CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:
Department:
Dept. Contact:
Phone:
Department Head
$\quad$ Signature:

CONTRACTOR:


CONTRACTING DEPARTMENT: Transportation
Service Requested: Review and Approval Parking Lot Agreement
Contract Term: Month to Month Contract/Amendment Amount:
Compliance with Human Resources Requirements?
Compliance verified by: Contract Notification Sent OK per
$\$ 0$
X ; HR Response Received
Yes:
$\qquad$ .

COUNTY COUNSEL: (must approve all contracts and MOSs)

Approved Approved:
$\qquad$ Disapproved: Disapproved:
$\qquad$ Date: 2/10/11 Date: $\qquad$ By: D. Livingston By: $\qquad$

## Please forward to Risk Management to provide a letter of self insurance to Lessor. as per their request.

| Index Code: 301313 | User Code: |
| :--- | :--- |

RISK MANAGEMENT: (All contracts and NOUs except boilerplate grant funding
Approved:
Approved: $\qquad$ Disapproved: $\qquad$
Date:
$\qquad$ By :
By:


OTHER APPROVAL (Specify departments) participating or directly affected by this contract).
Departments):
Approved: $\qquad$ Disapproved:
Approved: $\qquad$ Disapproved: $\qquad$ Date: By: $\qquad$
Date: $\qquad$ By:

