

# CONTRACT ROUTING SHEET

Date Prepared: November 19, 2013

Need Date: December 10, 2013

**PROCESSING DEPARTMENT:**

Department: CDA/Development Services  
Dept. Contact: Char Tim  
Phone #: X5351  
Department  
Head Signature: *[Signature]*

**CONTRACTOR:**

Name: \*\*Resolution to Adopt Building  
Address: Safety Division Fee Schedule  
Phone: 5369

**CONTRACTING DEPARTMENT:**

Service Requested: \_\_\_\_\_  
Contract Term: \_\_\_\_\_ Contract Value: \$0.00  
Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Compliance verified by: \_\_\_\_\_

**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 12/4/13 By: D. Livingston  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*\* AS REVISED*

RECEIVED  
NOV 19 2013  
El Paso County Counsel

**RISK MANAGEMENT:** (All contracts and MOU's except boilerplate grant funding agreements)

Approved: NA Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

**OTHER APPROVAL:** (Specify department(s) participating or directly affected by this contract).

Departments: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_