

CONTRACT ROUTING SHEET

Date Prepared: May 31, 2019

Need Date: June 27, 2019

PROCESSING DEPARTMENT:

Department: Planning & Building Dept.

Dept. Contact: Char Tim

Phone #: X5351

Department: _____

Head Signature: [Signature] 05/31/19

CONTRACTOR:

Name: Not Applicable

Address: _____

Phone: _____

CONTRACTING DEPARTMENT: Planning & Building Dept.

Service Requested: Review of Rezone Ordinance for Bado (Z18-0001)

Contract Term: NA Contract Value: \$0.00

Compliance with Human Resources requirements? Yes: _____ No: _____

Compliance verified by: _____

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

Approved: X Disapproved: _____ Date: 6/25/19 By: Bre Moebius

Approved: _____ Disapproved: _____ Date: _____ By: _____

CLERK OF COUNTY COUNSEL
2019 MAY 31 PM 1:06

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

Approved: N/A Disapproved: _____ Date: _____ By: _____

Approved: _____ Disapproved: _____ Date: _____ By: _____

NOT APPLICABLE

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

Departments: _____

Approved: N/A Disapproved: _____ Date: _____ By: _____

Approved: _____ Disapproved: _____ Date: _____ By: _____



ORDINANCE NO. _____

THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO DOES ORDAIN AS FOLLOWS:
RELATED TO REZONING IN THE GEORGETOWN AREA, (PAUL BADO):

Section 1. The Official Zoning Map for the Georgetown area is hereby amended to rezone the following described lands:

From: Commercial, Main Street (CM)

To: One-acre, Residential (R1A)

Georgetown Area:

Assessor's Parcel No. 061-200-006, being described as a portion of Section 11, T12N, R10E, M.D.M, consisting of 1.41 acres.

Section 2. This ordinance shall take effect and shall become effective thirty (30) days following the adoption hereof.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held on the ____ day of _____, 2019, by the following vote of said Board:

Ayes:

Noes:

Absent:

ATTEST
JAMES S. MITRISIN
Clerk of the Board of Supervisors

By _____
Deputy Clerk

Chairman, Board of Supervisors

APPROVED AS TO FORM
DAVID A. LIVINGSTON
County Counsel

By _____
Breann M. Moebius,
Deputy County Counsel

I CERTIFY THAT the foregoing instrument is a correct copy of the original on file in this office.
Dated: _____

ATTEST:
JAMES S. MITRISIN, Clerk of the Board of Supervisors
of the County of El Dorado, State of California.

By _____
Deputy Clerk