


CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Transportation
Dept. Contact: Deb Lane
Phone: X5933
Department Head
Signature: 
Jim Ware P.E. Director
Pete Feild, R/W Manager

CONTRACTOR:

Name: **Emerald Bay Properties LLC, Ross Groelz**
Address: 2074 Lake Tahoe Blvd. South Lake Tahoe, CA 96150
Phone: (530) 541-4640

CONTRACTING DEPARTMENT: Department of Child Support Services
Service Requested: Lease Agreement 159-L1011 for operations of Child Support office
Contract Term: 10/1/09 – 9/30/2012 **Contract/Amendment Amount:** \$
Compliance with Human Resources Requirements? Yes: X No: _____
Compliance verified by: Contract Notification Sent _____; HR Response Received _____;
OK per _____.

COUNTY COUNSEL: (must approve all contracts and MOUs)

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

Please forward to Risk Management upon approval.

Index Code: <u>301313</u>	User Code: _____
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RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements)

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

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

Department(s): _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

