


**REVIEW AND APPROVAL REQUESTED FOR:**

☐ Contract ☐ Amendment ☒ Resolution ☐ Ordinance ☐ Policy ☐ Other

**County Counsel  
REVIEW ROUTING SHEET**

Date Prepared: 4/1/25Need Date: 4/22/25**PROCESSING DEPARTMENT**

Department: Transportation  
Dept Contact: Liz Hess  
Phone: x5178  
Dept. Signature:   
Title: Deputy Director

Org Code: 3590820  
Funding Source: Benefit Assessment/Special Tax  
PL String: n/a  
Legistar #: 25-0429

**CONTRACT INFORMATION**

CONTRACT #: \_\_\_\_\_ CONTRACT AMENDMENT #: \_\_\_\_\_

Contracting Department: \_\_\_\_\_

Contractor/Vendor Name: \_\_\_\_\_


Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

*Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.***ORDINANCE/RESOLUTION/POLICY INFORMATION**TITLE / SUBJECT: Fernwood-Cothrin Election Request

NUMBER (If Assigned): \_\_\_\_\_

**DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL**Please review the attached Resolution and Exhibit A for a June Board Hearing.**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 4/3/25  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_

Daniel  
By: Vandekoolwyk   
By: \_\_\_\_\_  
Digitally signed by Daniel Vandekoolwyk  
Date: 2025.04.03 16:08:58 -07'00'

**COMMENTS****CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: \_\_\_\_\_

**RISK APPROVAL**

Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_

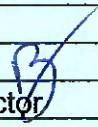
**COMMENTS** \_\_\_\_\_

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**County Counsel  
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Department: Transportation  
Dept Contact: Liz Hess  
Phone: x5178  
Dept. Signature:   
Title: Deputy Director

Org Code: 3590820  
Funding Source: Benefit Assessment/Special Tax  
PL String: n/a  
Legistar #: 25-0429

**CONTRACT INFORMATION**

CONTRACT #: \_\_\_\_\_ CONTRACT AMENDMENT #: \_\_\_\_\_

Contracting Department: \_\_\_\_\_

Contractor/Vendor Name: \_\_\_\_\_

Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

*Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.*

**ORDINANCE/RESOLUTION/POLICY INFORMATION**TITLE / SUBJECT: Lynx Trail Election Request

NUMBER (If Assigned): \_\_\_\_\_

**DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL**

Please review the attached Resolution and Exhibit A for a June Board Hearing.

**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 4/3/25  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_

Daniel  
By: Vandekoolwyk  
By: \_\_\_\_\_  
Digitally signed by Daniel Vandekoolwyk  
Date: 2025.04.03 16:27:02 -07'00'

**COMMENTS****CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: \_\_\_\_\_

**RISK APPROVAL**

Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_

**COMMENTS**




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**County Counsel  
REVIEW ROUTING SHEET**

Date Prepared: 4/1/25Need Date: 4/22/25**PROCESSING DEPARTMENT**

Department: Transportation  
Dept Contact: Liz Hess  
Phone: x5178  
Dept. Signature:   
Title: Deputy Director

Org Code: 3590820  
Funding Source: Benefit Assessment/Special Tax  
PL String: n/a  
Legistar #: 25-0429

**CONTRACT INFORMATION**

CONTRACT #: \_\_\_\_\_ CONTRACT AMENDMENT #: \_\_\_\_\_

Contracting Department: \_\_\_\_\_

Contractor/Vendor Name: \_\_\_\_\_

Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

*Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.***ORDINANCE/RESOLUTION/POLICY INFORMATION**TITLE / SUBJECT: Meadowview Acres Election Request

NUMBER (If Assigned): \_\_\_\_\_

**DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL**

Please review the attached Resolution and Exhibit A for a June Board Hearing. \_\_\_\_\_

**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 4/3/25  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_

Daniel  
Vandekoolwyk  
By: \_\_\_\_\_  
By: \_\_\_\_\_

Digitally signed by Daniel  
Vandekoolwyk  
Date: 2025.04.03 16:56:23 -07'00'

**COMMENTS** \_\_\_\_\_**CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: \_\_\_\_\_

**RISK APPROVAL**

Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_

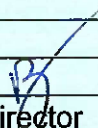
**COMMENTS** \_\_\_\_\_

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Dept Contact: Liz Hess  
Phone: x5178  
Dept. Signature:   
Title: Deputy Director

Org Code: 3590820  
Funding Source: Benefit Assessment/Special Tax  
PL String: n/a  
Legistar #: 25-0429

**CONTRACT INFORMATION**

CONTRACT #: \_\_\_\_\_ CONTRACT AMENDMENT #: \_\_\_\_\_

Contracting Department: \_\_\_\_\_

Contractor/Vendor Name: \_\_\_\_\_

Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

*Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.***ORDINANCE/RESOLUTION/POLICY INFORMATION**TITLE / SUBJECT: Walnut Drive Election Request

NUMBER (If Assigned): \_\_\_\_\_

**DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL**Please review the attached Resolution and Exhibit A for a June Board Hearing.**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 4/3/25  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_

Daniel  
By: Vandekoolwyk  
By: \_\_\_\_\_  
Digitally signed by Daniel Vandekoolwyk  
Date: 2025.04.03 17:10:28 -07'00'

**COMMENTS****CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: \_\_\_\_\_

**RISK APPROVAL**

Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_

**COMMENTS** \_\_\_\_\_