

Counsel please include this information in your billing description.	Contract #: 10-30543	Legistar #: 16-0095	P & C #: 360-C1699
	Index Code: 305100	Lav Log #: 16-21436	Activity Code: 73360 A105I
	Project Description: Contract Plans and Specifications for the Cold Springs Road at Mount Shasta Lane Realignment Project # 73360.		

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Department of Transportation
 Division: Transportation
 Dept Contact: Brian Franklin
 Phone: x5311
 Dept Head Signature: _____
 Brian Franklin, P.E.
 Office Engineer

CONTRACTING DEPT: Transportation Division

Service Requested: **Review & Approve**
 Contract Term: _____
 Contract/Amendment Amount: _____
 Compliance with Human Resources Requirements: Yes: No:
 Compliance verified by: **Contract Notification Sent:** _____ **HR Response Received:** _____
Ok Per: NA

COUNTY COUNSEL: (must approve all contracts and MOUs)

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

Please forward to Risk Management upon approval.

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)

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

Counsel please include this information in your billing description.	>	-AGMT 16-54384	Legistar #:	P&C #:	
	>	Index Code: 305100	Project #: 73360	Charge To #: 73360 P505P	
	>	Project	Draft Addendum to the Cold Springs Road Realignment Project Initial		
	>	Description:	Study/Mitigated Negative Declaration to include Provisions for Construction Detour. CIP #73360. SCH #2012092047		

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Community Development Agency
 Division: Transportation
 Dept Contact: Janet Postlewait
 Phone: x5993

Authorized Signature: _____
 Matthew Smeltzer
 Deputy Director of Engineering
 Fairlane Engineering Unit

CONTRACTOR:

Name: N/A
 Address:
 Phone:

CONTRACTING DEPT: CDA

Service Requested: Review & Approve
 Contract Term:
 Contract/Amendment Amount: **\$0.00**

Date Submitted: 1/25/2016
 Date Needed: 2/8/2016
 Funding Sources: HSIP, RSTP Exchange Funds - Caltrans, RSTP Match Funds - Caltrans

Compliance with Human Resources Requirements: Yes: _____ No: **X**
 Compliance verified by: **Contract Notification Sent:** _____ **HR Response Received:** _____
Ok Per: N/A - Env Doc

COUNTY COUNSEL: (must approve all contracts and MOUs)

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

Please forward to Transportation upon approval.

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)

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

Counsel please include this information in your billing description.	>	-	Legistar #: 16-0095	P&C #: 360-C1699
	>	Index Code: 305100	Project #: 73360	Charge To #: 73360 A105I
	>	Project Cold Springs Road at Mount Shasta Lane Realignment Project, CIP #73360		
	>	Description:		

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Community Development Agency
 Division: Transportation
 Dept Contact: Brian Franklin
 Phone: x5311

CONTRACTOR:

Name: TBD
 Address:
 Phone:

Authorized Signature: _____
 Brian Franklin, P.E.
 Office Engineer

Date Submitted:
 Date Needed:
 Funding Sources: HSIP, RSTP (federal)

CONTRACTING DEPT: Transportation Division

Service Requested: Review & Approve

Contract Term:

Contract/Amendment Amount: **\$0.00**

Compliance with Human Resources Requirements: Yes: _____ No: X

Compliance verified by: **Contract Notification Sent:** _____ **HR Response Received:** _____

Ok Per: NA

COUNTY COUNSEL: (must approve all contracts and MOUs)

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

Please forward to Transportation upon approval.

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)

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