

REVIEW AND APPROVAL REQUESTED FOR:

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

**County Counsel
REVIEW ROUTING SHEET**

Date Prepared: 6/4/25

Need Date: 6/18/25

PROCESSING DEPARTMENT

Department: AQMD
Dept Contact: Scott Wilson
Phone: x7554
Dept. Signature: Rania Serieh
Title: APCO

Digitally signed by Rania Serieh
Date: 2025.06.05 09:25:13 -0700

Org Code: 7110100
Funding Source: Prescribed Burn Admin Funds
PL String: 71DISTOPS-71PRESCRIB-71CONT
Legistar #: 25-1074

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: Acceptance of Prescribed Burn Reporting...
NUMBER (If Assigned): Not yet assigned

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL

Please review/approved resolution allowing AQMD to accept prescribed burn reporting and monitoring support program funds - and authorize APCO to execute agreements for the program thru 12/31/2029

COUNTY COUNSEL

Approved ☒ Disapproved ☐ Date: 6/16/25 By: Ted Wood
Approved ☐ Disapproved ☐ Date: By:
Digitally signed by Ted Wood
Date: 2025.06.16 13:50:14 -0700

COMMENTS Approved as to form - TDW

CONTRACT AMENDMENT ONLY**HR APPROVAL**

Compliance with Human Resources requirements? Yes: ☐ No: ☐
Compliance verified by:
BY NAME

RISK APPROVAL

Approved ☐ Disapproved ☐ Date: By:
Approved ☐ Disapproved ☐ Date: By:
BY NAME

COMMENTS