

Counsel please include this information in your billing description.	> Contract #: 19 - 41593	Legistar #: 19-0663	P & C #: NA
	> Index Code: 3500000	Smrg: 3500000 - 35INDIRECT	
	> Project	Resolution to Adopt Fee Schedule and Fee Policies and Procedures for the Planning and	
	> Description:	Building Department and Adpoting fees for Services	

## RESOLUTION ROUTING SHEET

**PROCESSING DEPARTMENT:**

Department: Community Development Agency  
 Division: Development Services  
 Dept Contact: Becky Morton, CFO  
 Phone: x4008  
 Dept Head Signature: Becky Morton

**CONTRACTOR: NA**

Rec'd  
6/17/19 ?

**CONTRACTING DEPT: CDA**

Service Requested: **Review & Approve**

Contract Term: **NA**

Contract/Amendment Amount: 0

Compliance with Human Resources Requirements: Yes: X No: \_\_\_\_\_

Compliance verified by: Contract Notification Sent: NA - Resolution

**COUNTY COUNSEL:** (must approve all contracts and MOUs)

Approved: \_\_\_\_\_ Disapproved: X Date: 7/22/19 By: Bre Moebius  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Note: Exhibit A to be added at a later date.  
Please address comments on drafts and resubmit new drafts when Exhibit A is included.  
8/1/19 - Revisions attached, fee schedules added, Agreement to pay added. JL.

**Please forward to Risk Management upon approval.** *Please Return to CDS: Admin/Finance  
Attn: Jennifer Larson*

**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: \_\_\_\_\_