Resolution #: **#12-41397**
Legistar # 12-0513
Resolution and Exhibit A

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:
Department: Transportation
Dept. Contact: Michele Smith
Phone: X4937
Department Head Signature: [signature]
Tom Celio
Deputy Director, Maintenance and Operations

CONTRACTOR:
Name: **Assessment Resolution and Hearing – CSA #3**
Address: Snow Removal Zones of Benefit, fiscal year 2012/2013
Phone: X 4905

CONTRACTING DEPARTMENT: Transportation
Service Requested: _____
Contract Term: _____ **Contract/Amendment Amount:** **$** _____
Compliance with Human Resources Requirements? Yes: **N/A** **No:** _____
Compliance verified by: **N/A - Resolution**.

COUNTY COUNSEL: (must approve all contracts and MOUs)
Approved: ✓ Disapproved: _____ Date: 5/7/12 By: D. Livingston
Approved: _____ Disapproved: _____ Date: _____ By: _____

Index Code: ***Various – Special Districts***	User Code: ***No Charge***

RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements)
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

RISK MANAGEMENT REVIEW NOT REQUIRED – PLEASE RETURN DIRECTLY TO DOT

OTHER APPROVAL (Specify department(s) participating or directly affected by this contract).
Department(s): _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____