Contract #: 003-S1310 A2
Index Code: 531301

CONTRACT ROUTING SHEET

Date Prepared: 2/10/14 **Need Date:**

PROCESSING DEPARTMENT:
Department: HHSA/CSD
Dept. Contact: Heather Longo
Phone #: X7373
Department Head Signature:
Don Ashton, M.P.A.,
Director

CONTRACTOR:
Name: Ski Air Inc.
Address: 5528 Merchant Cir., Placerville, CA 95667
Mailing: PO Box 1054, El Dorado, CA 95623
Phone: 530-626-4010

CONTRACTING DEPARTMENT: HHSA/Community Services Divison
Service Re uested: Heating and Air Conditioning System Design, Installation, and Repair Service
Contract Term: 7/1/12-6/30/15 Contract/Grant Value: 98,318.00
Compliance with Human Resources requirements? N/A ___ Yes x No:
Compliance verified by: Mike Strella 2/12/14 MW

EL DORADO COUNTY COUNSEL
2014 FEB 21 AM 8:50

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: ✓ Disapproved: ___ Date: 3/5/2014 By: K. Markham
Approved: ___ Disapproved: ___ Date: ___ By: ___

Was the requirement for a written estimate and written approval to commence work intentionally deleted? Contract states that County will not pay for unauthorized services. How will County determine whether services are authorized or unauthorized? See Scope of Work Art I

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RECEIVED
HUMAN RESOURCES DEPT.
2014 FEB 28 PM 12:28

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: ✓ Disapproved: ___ Date: 3/6/2014 By:
Approved: ___ Disapproved: ___ Date: ___ By:

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.
Departments:
Approved: ___ Disapproved: ___ Date: ___ By: ___
Approved: ___ Disapproved: ___ Date: ___ By: ___

Please contact (Heather Longo x 7373) with questions or for contract packet pick-up. Thank you!

Contracts Supe Review/Date 2/11/14 | Program Mgr. Review/Date Michelle Hunter 2/11/14 | Contracts Mgr. Review/Date Karen E. | CPO Review/Date 2/11/14