

|  |                      |   |                  |
|--|----------------------|---|------------------|
| Counsel please include this information in your billing description. | > -17-54771          | Legistar #: 17-0941   | P&C #: 513-S1510 |
|  | > Index Code: 424200 | Project #: N/A  | Charge To #: N/A |
|  | > Project            | First Amendment to Agreement for Services #513-S1510 for the Removal, |                  |
|  | > Description:       | Transportation, and Disposal of Sewage Septic Sludge                  |                  |

## CONTRACT ROUTING SHEET

**PROCESSING DEPARTMENT:**

Department: Community Development Agency  
 Division: Admin/Finance  
 Dept Contact: Sandy Ewert  
 Phone: x5102  
 Authorized Signature: *Michele Weimer*

Michele Weimer  
 Administrative Services Officer  
 CDS Contracts & Procurement

**CONTRACTOR:**

Name: Waste Connections of California, Inc, dba El Dorado Disposal  
 Address: P.O. Box 1270  
 Diamond Springs, California 95619  
 Phone:

Date Submitted:

Date Needed:

Funding Sources: County Service Area 10

**CONTRACTING DEPT: Environmental Mgmt Division**

Service Requested: Review & Approve

Contract Term: **4 Years**

Contract/Amendment Amount: **\$60,000.00**

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

Compliance verified by: **Contract Notification Sent: 11/21/17** HR Response Received: **11/27/17**

Ok Per: *Misty Garcia*

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

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: **12/13/17** By: **Bre Moebius**  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*Approved subject to HR approval*

EL DORADO COUNTY COUNSEL  
2017 NOV 30 PM 11:20

**Please forward to Risk Management upon approval.**

**RISK MANAGEMENT:** (All contracts and MOUs except boilerplate grant funding agreements)

Approved:  Disapproved: \_\_\_\_\_ Date: **12-14-17** By: **B**  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

ENC 19 HR/RM DEC 13 '17

**OTHER APPROVAL:** (Specify department(s) participating or directly affected by this contract)

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_