

REVIEW AND APPROVAL REQUESTED FOR:

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

**County Counsel
REVIEW ROUTING SHEET**

Date Prepared: 10/22/25Need Date: 11/5/25**PROCESSING DEPARTMENT**

Department: Transportation
Dept Contact: Ashley Johnson
Phone: 4925
Dept. Signature: 
Title: Deputy Director

Org Code: 3600010
Funding Source: Road Fund
PL String: 36001000-INDIRECT
Legistar #: Unknown at this time

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: Resolution for Weight Restriction on N. Upper Truckee
NUMBER (If Assigned): _____

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL

Review and approve Resolution for a weight restriction on North Upper Truckee

COUNTY COUNSEL

Approved ☒ Disapproved ☐ Date: 10/28/2025
Approved ☐ Disapproved ☐ Date: _____

Daniel
By: Vandekoolwyk
Digitally signed by Daniel Vandekoolwyk
Date: 2025.10.28 14:47:41 -07'00'

COMMENTS**CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: _____

RISK APPROVAL

Approved ☐ Disapproved ☐ Date: _____ By: _____
Approved ☐ Disapproved ☐ Date: _____ By: _____

COMMENTS