## AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 10/28/2021
PROCESSING DEPARTMENT:
Department:
Dept. Contact:
Phone:

| $\frac{\text { Planning and Building Department }}{\text { C.J. Freeland }}$ |
| :--- |
| ext. 5159 or (530) 391-6449 cell |
| Tiffany Schmid |

Department Head Signature:

Need Date: 11/10/2021
CONTRACTOR:

| Name: |
| :--- | :--- |
| Address: |
| Phone: |
| Pra |

Funding Source: CDBG grant funds

CONTRACTING DEPARTMENT: Planning and Building Department/ HCED Program
Service Requested: Review Resolution for special CDBG funding requirements
Description: HCD required resolution language to process awarded funding (two versions - HCD and EDC)
Contract Term: $\qquad$ Contract Value: $\qquad$
COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: Disapproved:

Date: $\qquad$ By: Kathleen Date: By: $\qquad$

Approval is only for the HCD version of the resolution (no recitals)
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HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO: cynthia.freeland@edcgov.us Thank you!

