

Agreement # n/a

Legistar # n/a

# AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 03/28/2022

Need Date: 04/15/2022

### PROCESSING DEPARTMENT:

Department: CAO  
Dept. Contact: Jennifer Franich  
Phone: x7539  
Department Head Signature: Jennifer Digitally signed by Jennifer  
Date: 2022.03.28 12:37:00  
-07'00'

### CONTRACTOR:

Name: n/a  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Org Code: 0200000  
Project # \_\_\_\_\_  
(if applicable): \_\_\_\_\_  
Funding Source: \_\_\_\_\_

### CONTRACTING DEPARTMENT: CAO

Service Requested: Review Resolution for fee increase and new ADU fee

Description: Impact Fees increase for EDH CSD

Contract Term: n/a Contract Value: \_\_\_\_\_

### COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved:  Disapproved:  Date: 04/06/2022 By: Janeth SanPedro Digitally signed by Janeth SanPedro  
Date: 2022.04.06 10:40:25 -07'00'  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

With edits as noted.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_