


CONTRACT ROUTING SHEET

Date Prepared: 1/5/2024

Need Date: 01/19/2024

PROCESSING DEPARTMENT:

Department: DOT
Dept. Contact: Jen Rimoldi
Phone: X7592
Department
Head Signature: 
Jen Rimoldi

CONTRACTOR:

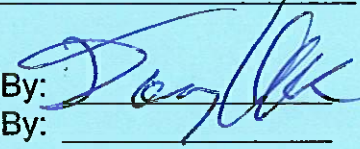
Name: TBD
Address: _____
Phone: _____
Org Code: 3600010

CONTRACTING DEPARTMENT: DOT – Maintenance

Service Requested: Review and Approve Contract Documents for 2024 DOT Maintenance Pavement Rehabilitation Projects - Contract No. 8357

Contract Term: 90 Working Days Contract Value: TBD

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


Approved: X Disapproved: _____ Date: 1/10/2024 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

COUNSEL -- PLEASE FORWARD TO RISK MANAGEMENT -- THANKS!

HR APPROVAL: - N/A – PUBLIC WORKS CONTRACT

Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: X Disapproved: _____ Date: 1-16-24 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please Forward to Risk Management for Review and Approval of Insurance Requirements in Agreement Article 37 "Insurance"

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

Departments: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____