

CONTRACT ROUTING SHEET

Date Prepared: 1/23/2024

Need Date: 2/6/2024

PROCESSING DEPARTMENT:

Department: DOT

Dept. Contact: Jen Rimoldi

Phone: X7592

Department

Head Signature:  Jen Rimoldi

CONTRACTOR:

Name: TBD

Address: _____

Phone: _____

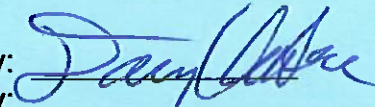
Org Code: 36101000 – 36105071 & 36105073

CONTRACTING DEPARTMENT: DOT – Fairlane Engineering

Service Requested: Review and Approve Contract Documents for Pedestrian Safety Improvements and Pony Express Trail Recessed Edge-Lines Projects - Contract No. 7449

Contract Term: 40 Working Days Contract Value: TBD

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

Approved: Disapproved: _____ Date: 1/26/2024 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

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

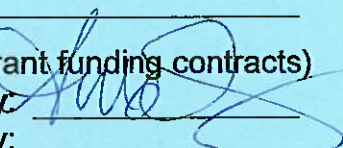
EDC COUNTY COUNSEL
2024 JAN 23 PM5:00

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: Disapproved: _____ Date: 1/29/2024 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please Forward to Risk Management for Review and Approval of Insurance Requirements in Special Provisions Section 7-1.06 "Insurance"

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

Departments: _____

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

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