

Counsel please include this information in your billing description.	>	AGMT-07-1458	Legistar #: 13-0200	P&C #: NA
	>	Index Code: 306440	Project #: 96000	Charge To #: 96000
	>	Project Description: AGMT 13-53649 - Subdivision Improvement Agreement - Second Amendment for West Valley Village Unit 4 to extend term - 1 year to February 7, 2014.		
	>			

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Community Development Agency
 Division: Transportation
 Dept Contact: Gregory Hicks
 Phone: x5929
 Authorized Signature: *Bard R. Lower*

Bard R. Lower
 Transportation Division Director

CONTRACTOR:

Name: Meritage Homes of California, Inc.
 Address: 1671 East Monte Vista Ave., Ste. 2
 Vacaville, CA 95688
 Phone: (707) 359-2000 x 2014

CONTRACTING DEPT: Transportation

Service Requested: Review & Approve

Contract Term: 1 Years

Contract/Amendment Amount: \$0.00

Compliance with Human Resources Requirements: Yes: X No: _____

Compliance verified by: _____ Contract Notification Sent: _____ HR Response Received: _____

Ok Per: NA - Subdivision Imp. Agmt.

COUNTY COUNSEL: (must approve all contracts and MOUs)

Approved: *Conrad Form* Disapproved: _____ Date: *10/8/13* By: *Justin Beck*
 Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY
 2013 OCT 11 AM 11:00

Conditional Approval: Form of extension approved; but aspect of extension application DOT is to re-examine estimate after 90 days with a bond amount to make sure they reflect current estimates. Confirmed w/ dept that has not yet been done. So return to dept for evaluation. If amounts need to be adjusted on bond would need to be obtained if this package returned to CC for approval.

Please forward to DOT upon approval.

Dr. Dave Spiegelberg of Contra Unit the project is 98% comp and ready to be finalized. Bonds are sufficient.

RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements)

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

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

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