

Date Prepared: \_\_\_\_\_

Need Date: \_\_\_\_\_

**PROCESSING DEPARTMENT:**

Department: Community Development Agency  
 Dept. Contact: Transportation: Adam Bane  
 Phone #: X 5983  
 Department \_\_\_\_\_  
 Head Signature: \_\_\_\_\_

**CONTRACTOR:** Caltrans

Name: HOU Phase 3  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:**

Service Requested: Review & Approve  
 Contract Term: 7 years Contract Value: ~~\$~~ 590,165 ~~\$0.00~~  
 Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: X  
 Compliance verified by: \_\_\_\_\_

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

Approved: Form Disapproved: \_\_\_\_\_ Date: 12/10/14 By: Justin Beck  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Agreement drafted by CC - comments to Adam Bane re issues resolved

EL DORADO COUNTY COUNSEL  
 2014 DEC 10 AM 11:30

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

**RISK MANAGEMENT:** (All contracts and MOU's 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).

Departments: \_\_\_\_\_  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_