

Contract #: 397-S1311
Index Code: 403210

CONTRACT ROUTING SHEET

Resubmit
Date Prepared: 04-19-2013 *05-24-2013*

Need Date: 05-29-2013

PROCESSING DEPARTMENT:

Department: HHS/PA Public Health
Dept. Contact: Zhana Mc Cullough
Phone #: Ext. 7154
Department
Head Signature: *[Signature]*
Janet Walker-Conroy
Interim Director

CONTRACTOR:

Name: Placer County – Envrmntnl Mngt
Address: 3091 County Center Dr., Ste 180
Auburn, CA 95603
Phone: _____

CONTRACTING DEPARTMENT: Health and Human Services Agency/Public Health

Service Requested: LEA oversight of waste management services

Contract Term: 07/01/2013 – 06/30/2016 Contract/Grant Value: \$360,000

Compliance with Human Resources requirements? N/A Yes X No: _____

Compliance verified by: Feasibility Analysis attached.

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

Approved: _____ Disapproved: ✓ Date: 5/22/2013 By: *[Signature]*
Approved: ✓ Disapproved: _____ Date: 5/21/2013 By: *[Signature]*

Minor typo on pg. 4
Corrected
06-10-2013
3m

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: ✓ Disapproved: _____ Date: 6/6/13 By: *[Signature]*
Approved: _____ Disapproved: _____ Date: _____ By: _____

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

NOTE: All contracts that involve the acquisition of software or computer related items must be first approved by IT. Any contract that requires approval from another department must also be first approved by the other department.

Departments: _____

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

[Signature]
PM Review/Date
Rev. 12/2000 (00-0001)
[Signature]
CFO Review/Date 5/5/13
[Signature] 5/5/13
Contracts Supe Review/Date