

CONTRACT ROUTING SHEET

Date Prepared: January 19, 2017

Need Date: January 27, 2017

PROCESSING DEPARTMENT:

Department: CDA/Development Services
Dept. Contact: Char Tim
Phone #: X5351
Department Head Signature: *Roger [Signature]*

CONTRACTOR:

Name: Not Applicable
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: CDA/Development Services Division

Service Requested: Review of Rezoning Ordinance for Bass Lake North (Z14-0008)
Contract Term: NA Contract Value: \$0.00
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 1/19/17 By: D. [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

COUNTY CLERK

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

Approved: N/A Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

NOT APPLICABLE

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

Departments: _____
Approved: N/A Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____



ORDINANCE NO. _____

THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO DOES ORDAIN AS FOLLOWS:

RELATED TO REZONING IN THE EL DORADO HILLS AREA, (Bass Lake North):

Section 1. The Official Zoning Map for the El Dorado Hills area is hereby amended to rezone the following described lands:

From: Residential Estate Ten Acres (RE-10)

To: Single Unit Residential-Planned Development (R1-PD)

El Dorado Hills Area:

Assessor's Parcel Nos. 115-400-06, 115-400-07, and 115-400-08, being described as a portion of Section 31, T10N, R9E, M.D.M, consisting of 38.57 acres.

Section 2. This ordinance shall take effect and shall become effective thirty (30) days following the adoption hereof.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held on the ____ day of _____, 2017, by the following vote of said Board:

Ayes:

ATTEST
JAMES S. MITRISIN
Clerk of the Board of Supervisors

Noes:
Absent:

By _____
Deputy Clerk

Chairman, Board of Supervisors

APPROVED AS TO FORM
MICHAEL J. CICCOTI
County Counsel

By _____
David A. Livingston,
Chief Assistant County Counsel

I CERTIFY THAT the foregoing instrument is a correct copy of the original on file in this office.
Dated: _____

ATTEST:
JAMES S. MITRISIN, Clerk of the Board of Supervisors
of the County of El Dorado, State of California.

By _____
Deputy Clerk