**Resolution #:** 

**Resolution and Exhibit A** 

## CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:		CONTRA	CONTRACTOR:		
Department: Transportation		Name:	Assessment Resolution		
Dept. Contact:			and Hearing – CSA #3		
		Address:	Snow Removal Zones of		
Department Head			Benefit, fiscal yea		
Signature:	Jan O.C.	Phone:	Donom, noour you		
•	Tom Celio				
	Deputy Director, Maintenanc	e and Operations			
CONTRACTING D	EPARTMENT: Transpor	tation			
Service Requested					
Service Requested: Contract/Amendment Amount				*****	
Compliance with H	uman Resources Requirer	nents? Yes:	N/A No:		
Compliance verifie	d by: Contract Notificatio	on Sent	; HR Response Rece	ived :	
	EL: (must approve all con			-M-	
Approved:	Disapproved:	Date: <u>5/24/m</u>	By: D.LIVINGASIGN		
Approved:	Disapproved:	Date:	By:		
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				<u>N 2</u>	
				angeng and a	
Index Order Verley	- Createl Districts			- G	
Index Code: Variou	<u>s – Special Distr</u> ict <del>s</del>	User Code:	No Charge	17 <u>1</u> 	
<b>RISK MANAGEME</b>	NT: (All contracts and MC	)Us except boile	rolate grant funding a	areements)	
	Disapproved:				
	Disapproved:		By:		
Approved			Uy		
RISK MANAGEM	ENT REVIEW NOT REQU	IIDED - DI EAS		I V TO DOT	
		JINED - FELAS			
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	L (Specify depertment(a)	norticipating as a	l'an aile a ffa air al les als	5 ¢	
	L (Specify department(s)	participating or c	meetily amected by th	is contract).	
Department(s):		Data	D	····	
	Disapproved:		By:		
Approved:	Disapproved:	Date:	By:		
				******	
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