

Contract #: Resolution of Intention for Housing Element Update  
**CONTRACT ROUTING SHEET**

Date Prepared: 7/2/18

Need Date: 7/26/18

**PROCESSING DEPARTMENT:**

Department: Planning & Building/HCED  
Dept. Contact: C.J. Freeland  
Phone #: EXT. 5159  
Department Head Signature: *Michael Dehan*  
*AK*

**CONTRACTOR:**

Name: N/A  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** Planning & Building/Long Range Planning /HCED

Service Requested: Approval of ROI for the 2021-2029 Housing Element Update  
Contract Term: N/A Contract Amendment Value: N/A  
Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Compliance verified by: \_\_\_\_\_

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

Approved:  Disapproved: \_\_\_\_\_ Date: 7/12/18 By: K. Markham  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*Conditional approval - approved if corrections  
have made*

*corrections  
completed*

EL DORADO COUNTY COUNSEL  
2018 JUL -3 AM 7:37

*Please call CJ Freeland (ext 5159) when ready for pick up*

**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: \_\_\_\_\_