

# CONTRACT ROUTING SHEET

Date Prepared: October 10, 2019

Need Date: ~~October 31, 2019~~

**PROCESSING DEPARTMENT:**

Department: Planning & Building Dept.

Dept. Contact: Char Tim

Phone #: X5351

Department

Head Signature: [Handwritten Signature]

**CONTRACTOR:**

Name: Not Applicable

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** Planning & Building Dept.

Service Requested: Review of Resolution Certifying Final EIR for Creekside Plaza

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: X Disapproved: \_\_\_\_\_ Date: 11/26/19 By: Bre Mulhaus

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

Approved as to form.

Please see edits and comments on draft Resolution and Exhibits

Edits made to Resolution. - CT

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

EDC COUNTY COUNSEL  
2019 OCT 16 AM 9:54