## AGREEMENT CONTRACT ROUTING SHEET



Need Date: $12 / 12 / 19$
CONTRACTOR:
Name: SNO Foundation Trust
Address: 8863 Greenback Ln \#324
Orangevale CA 95662
Phone: 916-949-8882
Org Code: 3735352
Project String
(if applicable):
Funding Source: Housing Trust Fund 3735351

CONTRACTING DEPARTMENT: Planning \& Building Dept./Long Range Planning, HCED
Service Requested: Review and Approve Resolution
Description: Transfer of prior loan approval from CoreCare to SNO Foundation (DS Village Apts.)
Contract Term: 60 months Contract Value:

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved:
Approved:
 Disapproved: Disapproved:
$\qquad$
$\qquad$
Date:
Date:

$B y$ :
 By: $\qquad$
$\qquad$

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL FOR PICK-UP Cynthia.freeland@edcgov.us Thank you!

