

Agreement # \_\_\_\_\_

Legistar # \_\_\_\_\_

# AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 6/24/2020

Need Date: June 26, 2020

**PROCESSING DEPARTMENT:**

Department: AQMD

Dept. Contact: Rania Serieh

Phone: 530 621 7509

Department

Head Signature: 

**CONTRACTOR:**

Name: N/A

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

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

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

Org Code: \_\_\_\_\_

Project String

(if applicable): \_\_\_\_\_

Funding Source: \_\_\_\_\_


**CONTRACTING DEPARTMENT:** AQMD

Service Requested: Review of Revised Rule 1000 Emission Statement, Rule 1000.1 Emission Statement Waiver, Resolution, CEQA Notice of Exemption, Notice of Public hearing and staff report

Description: N/A

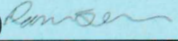
Contract Term: \_\_\_\_\_ Contract Value: \$0.00

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

Approved:  Disapproved: \_\_\_\_\_ Date: 8/6/2020 By: 

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

Please see edits/comments on drafts.

All changes were made. 6/25/2020 

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**HR APPROVAL:** WILL BE REVIEWED THROUGH WORKFLOW

**RISK MANAGEMENT:** WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL \_\_\_\_\_ FOR PICK-UP

Thank you!