***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** |  | **Meeting Date:** | **October 17, 2023** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Kyla Burton/Public Works**  | **Phone:** | **(530) 842-8250** |
| **Address:** | **1312 Fairlane Road, Suite 3, Yreka, CA**  |
| **Person Appearing/Title:** | **Thomas Deany, Director of Public Works**  |
| **Subject/Summary of Issue:** |
| It has been determined by Community Development that the current Financial Assurance Mechanism (FAM) is inadequate and the financial assurance should be increased for the the following pit sites (listed with their Restricted Fund balance accounts): Yellow Butte Pit 461720 increase by $84,617.71, Mount Shasta Quarry 461740 increase by$15,116.20, Little Lynn Pit 461770 increase by $27,214.30.The Department of Conservation has approved the release of FAM for the following pits (listed with their Restricted Fund balance accounts) that have been reclaimed: Truax Quarry 461750 $(19,623.00) and L&C Livestock Pit 461730 $(7,728.00). These Retricted Fund balances are required by the State of California Department of Conservation Mining and Reclaimation to assume costs of reclamation,  |
| **Financial Impact:** |
| **NO** | [ ]  | *Describe why no financial impact:*       |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | see above |  |  |  |  |
| Fund:  | 2103 |  | Description: | Road | Org.: | None (GL Account) | Description: |       |
| Account: |       |  | Description: |       |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |   |
| Net change to Road Dept. Fund Balance 481000 is $99,597.21 |
| **Recommended Motion:** |
| Respectfully request the Board of Supervisors to accept the increases and decreases to the above Fund Balance Restricted accounts.  |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |  |  |
|  |  |  | *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |  |  |  |  |  |
|  |  |  |  |  |  |
| Personnel |       |  | *Other:* |       |
| CAO |       |  |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021