

Agenda Worksheet

Submit completed worksheet to:
Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097

Regular Time Requested: 5 Minutes Meeting Date: 11/12/2024

OR

Consent

Contact Person/Department: GREG ROATH, COUNTY FIRE WARDEN Phone: 530-842-3516

Address: 1809 FAIRLANE ROAD, YREKA, CA 96097

Person Appearing/Title: GREG ROATH, COUNTY FIRE WARDEN

Subject/Summary of Issue:

Respectfully request that the Directors of County Service Area #4 approve the Agreement for Emergency Response Service between County Service Area No. 4 Mt. Shasta Vista Fire Zone of Increased Benefit and the Lake Shastina Community Services District.

Financial Impact:

NO Describe why no financial impact:

YES Describe impact by indicating amount budgeted and funding source below

Amount: 60,000

Fund: 2553 Description: MSV Org.: 204037 Description: MSV

Account: 723000 Description: _____

Activity Code: _____ Description: _____

Local Preference: YES NO

For Contracts – Explain how vendor was selected:

Additional Information:

Recommended Motion:

Respectfully request that the Directors of County Service Area #4 approve and authorize the Chair to sign the Agreement for Emergency Response Service between County Service Area No. 4 Mt. Shasta Vista Fire Zone of Increased Benefit and the Lake Shastina Community Services District.

Reviewed as recommended by policy:
County Counsel _____
Auditor _____
Personnel _____
CAO _____

Special Requests:
Certified Minute Order(s) X Quantity: 1
Other: _____

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.