

FOR COUNSEL USE  
ONLY

Date Received: \_\_\_\_\_  
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Method: Hand: \_\_\_\_\_  
Courier: \_\_\_\_\_  
Mail : \_\_\_\_\_

## REQUEST FOR LEGISLATIVE ACTION

DATE: 12/13/19  
DEPARTMENT: County Clerk  
Contact Person: Bruce A. Hidley

Telephone: (518) 487-5115 Dept. Representative Attending  
Committee Meeting: Audit & Finance/Law

### PURPOSE OF REQUEST:

Adoption of Local Law \_\_\_\_\_  
Amendment of Prior Legislation \_\_\_\_\_  
Approval/Adoption of Plan/Procedure \_\_\_\_\_  
Bond Approval \_\_\_\_\_  
Budget Amendment (See below) \_\_\_\_\_  
Contract Authorization (See below) X \_\_\_\_\_  
Environmental Impact \_\_\_\_\_  
Home Rule Request \_\_\_\_\_  
Property Conveyance \_\_\_\_\_  
Other: (State briefly if not listed above) \_\_\_\_\_

### CONCERNING BUDGET AMENDMENTS

#### STATE THE FOLLOWING:

Increase Account/Line No. \_\_\_\_\_  
Source of Funds: Appropriation already in 2019 budget

### CONCERNING CONTRACT AUTHORIZATION.

#### STATE THE FOLLOWING:

##### TYPE OF CONTRACT

Change Order/Contract Amendment \_\_\_\_\_  
Purchase (Equipment/Supplies) X \_\_\_\_\_  
Lease (Equipment/Supplies) \_\_\_\_\_  
Requirements \_\_\_\_\_  
Professional Services X \_\_\_\_\_  
Education/Training \_\_\_\_\_  
Grant: \_\_\_\_\_  
    New \_\_\_\_\_  
    Renewal \_\_\_\_\_  
    Submission Deadline Date \_\_\_\_\_

Settlement of a Claim \_\_\_\_\_  
Release of Liability \_\_\_\_\_  
Other: (State briefly) \_\_\_\_\_



**CONCERNING CONTRACT AUTHORIZATION (Cont'd)**

**STATE THE FOLLOWING:**

Contract Terms/Conditions:

Party (Name/Address): \_\_\_\_\_

Amount/Rate Schedule/Fee: \_\_\_\_\_

Term: \_\_\_\_\_

Scope of Services: \_\_\_\_\_

Contract Funding:

Anticipated in Current Budget: Yes X No \_\_\_\_\_

Funding Source: A1411-44046 Fees for Services

County Budget Accounts:

Revenue: \_\_\_\_\_

Appropriation: \_\_\_\_\_

Bond (Res. No. & Date of Adoption) \_\_\_\_\_

**CONCERNING ALL REQUESTS:**

Mandated Program/Service: Yes \_\_\_\_\_ No X

If Mandated Cite: Authority \_\_\_\_\_

Anticipated in Current Adopted Budget: Yes X No \_\_\_\_\_

If yes, indicate Revenue/Appropriation Accounts: A1411-44046

See Attached

Fiscal Impact - Funding: (Dollars or Percentages)

Federal N/A

State N/A

County 100%

Term/Length of Funding No change in funding - Budget Neutral

Previous Requests For Identical or Similar Action:

Resolution/Law Number: \_\_\_\_\_

Date of Adoption: \_\_\_\_\_

Justification: (State briefly why legislative action is requested)

See Attached

Back-up Material Submitted: (i.e., application/approval notices from funding source, bid tabulation sheet, civil service approval notice, program announcement, contracts and/or any materials which explain or support the request for legislative action.)

Submitted By: Bruce A. Hidley

Title: County Clerk