

DEPARTMENT: Public Works BY: David A. Randall PHONE: 966-5356
Public Works Administrator

RECOMMENDED ACTION AND JUSTIFICATION:

Public Works recommends that the Board of Supervisors approve the change of the hours of operation at the Fish Camp Solid Waste Transfer station from Sunday 10:00 AM - 3:00 PM to new hours of Wednesday 10:00 AM - 3:00 PM. This represents no increase in hours of operation or cost.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

At the Boards last meeting they referred this item to Public Works. This request has been initiated by the residents of Fish Camp that felt that Wednesday would be a more convenient day for many of the residents.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

1. The Board could chose to continue with the same operational hours.
2. The Board could direct Public Works to additionally pursue establishment of a Zone of Benefit for collection of solid waste from the community of Fish Camp. This in conjunction with a similar effort now under way in Wawona could possibly eliminate the need for the Transfer Station.

COSTS: () Not Applicable

A. Budgeted current FY \$ NA

B. Total anticipated costs \$ _____

C. Required Add'l funding \$ _____

D. Source: » _____

SPECIAL INSTRUCTIONS:

List the attachments and number the pages consecutively:

SOURCE: () 4/5ths Vote Required

A. Internal transfers \$ _____

B. Unanticipated revenues \$ _____

C. Reserve for contingency \$ _____

D. Description: _____

Balance in Reseve for Contingencies, if approved: \$ _____

CLERK'S USE ONLY:

Res. No.: 90-541

Ord. No.: _____

Vote - Ayes: 5 Noes: _____

absent Absent: _____ Abstained: _____

Approved () Denied

() Minute Order Attached

ADMINISTRATIVE OFFICER'S RECOMMENDATION:

This item on agenda as:

Recommended

_____ Not Recommended

_____ For Policy Determination

_____ Submitted with Comment

_____ Returned for Further Action

The foregoing instrument is a correct copy of the original on file in this office.

Date: _____

ATTEST: MARGIE WILLIAMS
Clerk of the Board of Supervisors
County of Mariposa, State of CA
By: _____
Deputy

Comment: _____

A.O. Initials: 