

CHECK LIST FOR ALDERMANIC SUBMISSIONS

<input checked="" type="checkbox"/>	Cover Letter
<input checked="" type="checkbox"/>	Resolutions/ Orders/ Ordinances (NOTE: If you are submitting any item to the State you must write a Resolution)
<input checked="" type="checkbox"/>	Prior Notification Form
<input checked="" type="checkbox"/>	Fiscal Impact Statement - Should include comprehensive budget
<input type="checkbox"/>	Supporting Documentation (if applicable)
<input type="checkbox"/>	E-mailed Cover letter & Order

IN ADDITION [IF A GRANT]:

<input type="checkbox"/>	N/A	Notice of Intent
<input type="checkbox"/>	N/A	Grant Summary
<input type="checkbox"/>	N/A	Executive Summary (not longer than 5 pages without an explanation)

Date Submitted: January 8th, 2024

Meeting Submitted For: January 16th, 2024

Regular or Suspension Agenda: Regular

Submitted By: Maritza Bond, Director of Health

Title of Legislation:

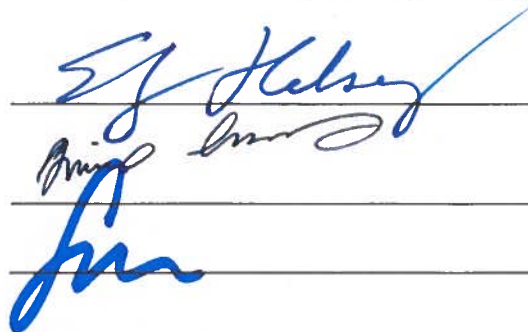
ORDINANCE AMENDMENT TO APPROPRIATING ORDINANCE # 1
RECLASSIFYING THE POSITION OF SENIOR SANITARIAN TO SANITARIAN
WITHIN THE HEALTH DEPARTMENT

Comments: Legistar File ID: OR-2024-0003

Coordinator's Signature:

Controller's Signature (if grant):

Mayor's Office Signature:



Call (203) 946-7670 or email bmontalvo@newhavenct.gov with any questions.

****PLEASE NOTE CLEARLY IF UC (UNANIMOUS CONSENT) IS REQUESTED****