

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 checked="" type="checkbox"/>	Supporting Documentation (if applicable) (MAP AND PROPERTY LIST)
<input checked="" type="checkbox"/>	E-mailed Cover letter & Order

IN ADDITION [IF A GRANT]:

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

Date Submitted: April 29th, 2024

Meeting Submitted For: May 6th, 2024

Regular or Suspension Agenda: Regular

Submitted By: Yale New Haven Hospital, Inc.

Title of Legislation:

ORDER OF THE NEW HAVEN BOARD OF ALDERS GRANTING A TEMPORARY EASEMENT OF APPROXIMATELY 11,290 SQUARE FEET FOR CONSTRUCTION ACTIVITIES IN CONNECTION WITH THE ED/HVC PROJECT AND TEMPORARY AMBULANCE AREA OVER PROPERTY OWNED BY THE CITY OF NEW HAVEN AND COMMONLY KNOWN AS A PORTION OF THE SOUTHBOUND LANE OF ORCHARD STREET BETWEEN CHAPEL STREET AND GEORGE STREET; AND ACCEPTING \$150,000 AS COMPENSATION.

Comments: Legistar File ID: LM-2024-0327

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****