

# **PRIOR NOTIFICATION FORM**

## **NOTICE OF MATTER TO BE SUBMITTED TO THE BOARD OF ALDERS**

TO (list applicable alders of):

ALL

WARD # **ALL**

DATE: **April 17<sup>th</sup>, 2023**

FROM: Department/Office Health Department  
Person Maritza Bond, Director Telephone (203) 946-8351

This is to inform you that the following matter affecting your ward(s) will be submitted to the Board of Alders in the near future:

ORDER AUTHORIZING THE MAYOR OF THE CITY OF NEW HAVEN TO APPLY FOR AND ACCEPT AN OVERDOSE DATA TO ACTION: LIMITING OVERDOSE THROUGH COLLABORATIVE ACTIONS IN LOCALITIES (OD2A: LOCAL) GRANT AWARD OF \$2,750,000 FOR THE PERIOD OF AUGUST 1, 2023 TO JULY 31, 2028 FROM CENTERS FOR DISEASE CONTROL AND PREVENTION AND TO EXECUTE, ACKNOWLEDGE, IMPLEMENT AND DELIVER ANY AND ALL DOCUMENTS AS MAY BE CONSIDERED NECESSARY OR APPROPRIATE WITH RESPECT THERETO.

Check one if this an appointment to a commission

☐

Democrat

☐

Republican

☐

Unaffiliated/Independent/Other \_\_\_\_\_

### **INSTRUCTIONS TO DEPARTMENTS**

1. Departments are responsible for sending this form to the alder(s) affected by the item.
2. This form must be sent (or delivered) directly to the alder(s) **before** it is submitted to the Legislative Services Office for the Board of Alders agenda.
3. The date entry must be completed with the date this form was sent the alder(s).
4. Copies to: alder(s); sponsoring department; attached to submission to Board of Alders.