Revised-01/09

-Agenda Sumi -Send 14 com -Transmittal of -Electronic Age	maries must be submitted no plete sets (original, single-side electronic Agenda Summarie enda Transmission Checklist:	later than <i>noon</i> Monday, ed+13 copies) – Items muss and associated records Agenda Summary	made with the Clerk of the Boar 15 days prior to the meeting days to the signed-off by appropriate a must be emailed to: bosagen Records If applicable and Arrangements for expedited process.	ate (along with electrons edepartments and/order da@co.mendocino.comunications dametrial, list other online info	onic submittals) County Counsel a.us rmation below
TO: Board of Supervisors		DATE:		anuary 15, 2016	
FROM:	County Counsel		MEETING	_	ebruary 2, 2016
DEPARTMEN	TT RESOURCE/CONTACT:	Matthew Kiedrowski	PHONE: 234-6896	Present	On Call
		Katharine L. Ellio	tt PHONE: 234-6885	Present	On Call 🔀
Consent Ag	genda 🛛 Regular Ag	enda Noticed	Public Hearing Ti	me Allocated fo	or Item: <u>N/A</u>
■ AGEND			nding Resolution No. proved an Amended R		
adopted (located 147-180-	Resolution No. 14-068 approximately seven	B, which made a ve miles south of Wil oproved an Ameno	ONS: On May 20, 20 ested rights determination lits on two parcels idented Reclamation Plan	on for the Harr ntified as Asses	is Quarry mine sor Parcel Nos.
Code, Ir Mendoc mandate Amende writ, sp intends	nc., which filed a verifing County Superior (errequiring the Counted Reclamation Plan.)	ied petition for wr Court ruled in favor by to set aside the The County has ur anty has done to c resolution along w	of Resolution No. 14-06 it of mandate to overtout or of Keep the Code at vested rights determinantil February 3, 2016, to comply with the writ. Fith its return to the write AT: N/A	arn the Board's and issued a per ation and the afile and serve if approved, C	approval. The remtory writ of approval of the its return to the
			ERK OF THE BOARD (CH	ECKED BY COB IF A	PPLICABLE):
			IMPACT:		
N/A	f Funding Curre N/A ISORIAL DISTRICT: 1	-	Annual Recurring Cost / A	Budgeted in Yes REMENT: Majori	No 🗌
a vested and autl	l rights determination norize Chair to sign sa	and approved an	olution rescinding Reso amended Reclamation		
	NATIVES: None recom: VIEW (NAME): <u>Alan D.</u>		<u> </u>	Pi	HONE: 463-4441
	ENDATION: Agree \boxtimes		o Opinion 🔲 🛚 Alterna		ort Attached
BOARD AC	TION (DATE:):□ Approved	☐ Referred to	۰	Other
	EXECUTED: Agreement	,	ution:		Other