



Legislation Details (With Text)

File #: 22-5583 **Version:** 1 **Name:**
Type: Policy **Status:** Passed
File created: 9/6/2022 **In control:** Commissioners Court
On agenda: 9/13/2022 **Final action:** 9/13/2022
Title: Request for approval to accept an affidavit and petition submitted by the residents of Cypress Forest Subdivision requesting the posting of "No Overnight Parking of Commercial Motor Vehicles" signs in compliance with the required regulations.

Sponsors:

Indexes:

Code sections:

Attachments: 1. 22-5583 Cypress Forest Subdivision No Overnight Parking of Commercial Motor Vehicles signs.pdf

Date	Ver.	Action By	Action	Result
9/13/2022	1	Commissioners Court		

Department: Commissioner, Precinct 3

Department Head/Elected Official: Tom S. Ramsey, P.E., Commissioner

Regular or Supplemental RCA: Regular RCA

Type of Request: Policy

Project ID (if applicable): N/A

Vendor/Entity Legal Name (if applicable): N/A

MWDBE Contracted Goal (if applicable): N/A

MWDBE Current Participation (if applicable): N/A

Justification for 0% MWDBE Participation Goal: N/A - Goal not applicable to request

Request Summary (Agenda Caption):

Request for approval to accept an affidavit and petition submitted by the residents of Cypress Forest Subdivision requesting the posting of "No Overnight Parking of Commercial Motor Vehicles" signs in compliance with the required regulations.

Background and Discussion:

N/A

Expected Impact:

N/A

Alternative Options:

N/A

Alignment with Goal(s):

- ☐ Justice and Safety
- ☐ Economic Opportunity
- ☐ Housing
- ☐ Public Health
- ☐ Transportation
- ☐ Flooding
- ☐ Environment
- ☒ Governance and Customer Service

Prior Court Action (if any):

Date	Agenda Item #	Action Taken

Location:

Address (if applicable):

Precinct(s): Choose an item.

Fiscal and Personnel Summary			
Service Name			
	SFY 22	FY 23	Next 3 FYs
Incremental Expenditures (do NOT write values in thousands or millions)			
Labor Expenditures	\$	\$	\$
Non-Labor Expenditures	\$	\$	\$
Total Incremental Expenditures	\$	\$	\$
Funding Sources (do NOT write values in thousands or millions)			
Existing Budget			
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Total Current Budget	\$	\$	\$
Additional Budget Requested			
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Total Additional Budget Requested	\$	\$	\$
Total Funding Sources	\$	\$	\$

Personnel (Fill out section only if requesting new PCNs)			
Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-
Total Personnel	-	-	-

Anticipated Court Date:

Anticipated Implementation Date (if different from Court date):

Emergency/Disaster Recovery Note: Not an emergency, disaster, or COVID-19 related item

Contact(s) name, title, department: Conrad Joe, Administrative Assistant

Attachments (if applicable):