

LARIMER COUNTY DOCUMENT REVIEW

Document(s) for signature REQUIRE the following:

- Required # of copies, plus one (1) extra file copy for the Commissioners' Office, including all attachments
- Complete signature block including name and title; (the correct title is "Chair")
- Flag ALL pages to be initialed and/or signed
- County Attorney's review and approval stamp on the signature page(s), per Policy 100.2N, ~ OR ~
 - Standard Service Agreement, no changes to template
 - Previously approved by County Attorney, no changes to template
 - Amendments to existing expenditure/revenue commitments which modify only the term (i.e., duration), scope of work, and/or adjustments to the contract price not exceeding 15% of the original contract price

Approved by Department Head: _____

(Signature)

Date: _____

3-27-20

PLEASE FILL IN ALL AREAS COMPLETELY

(All documents must be received by 12:00 noon the preceding Thursday)

Date: 04/07/2020

Document Type: Abatement Agreement/Amendment Deed Liquor License
 Miscellaneous Ordinance Policy Resolution

Document Title: Resolution waiving County Benefits Policy - Modifying the employee payment of premiums obligation for Larimer County Employees taking Personal Leave Without Pay

Purpose: The enable Larimer County staff to continue their benefits and only pay the employee portion of their premiums if taking Personal Leave Without Pay if the Benefited employee is able to demonstrate that they are unable to work solely as a result of COVID-19 impacting their business unit operations (no work available or ceasing to operate) and they are unable to work remotely.

Parties: Unable to estimate the number of staff at this time, however, we are expecting this to be minimal.

Effective Date From: 04/07/2020 To: 12/31/2020

Total Dollar Amount: _____ County Portion: _____

Contact Person: Jennifer Fairman Department: Human Resources Phone: 970-498-5983

Comments: Cost impact non-existent as it is already budgeted for employees for the year.

Please Mark One

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|--|--------------------------------------|-------------------------------------|---------------------------|
| 1. Will approval of this document lead to additional, increased, or new commitments/programs for the County? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> N/A |
| 2. Is the document of a sufficiently technical or otherwise complex nature that a briefing for the Commissioners is recommended? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> N/A |
| 3. Is a Personnel or Payroll change required or recommended? | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |

COUNTY MANAGER USE ONLY:

No Board Action Required Consent Agenda Admin Matters Codify