Attachment A

Monterey County Board of Supervisors Referral Submittal Form

Referral No. 2022.05 **Assignment Date: 2/08/22**

(Completed by CAO's Office)

SUBMITTAL - Completed by referring Board office and returned to CAO no later than noon on

Thursday prior to Board meeting:					
Date: 1/28/22 Submitted By:	Submitted By: Supervisors John Phillips			District #: 2	
Referral Title: Parking Prohibition Enforcement					
Referral Purpose: Codify no parking policy on Madison Lane					
Brief Referral Description:					
Roadside parking on Madison Lane has created a consistent and increasing public health and safety concern for					
the community and businesses of Boronda, particularly regarding traffic hazards caused by one lane traffic					
generated from parked vehicles. The purpose of this referral is to perform a traffic and engineering study so that					
we can put in place requisite signage to clarify and strengthen the ability for Monterey County Sheriff's Office					
peace officers to enforce Monterey County Code Section 12.28.010. The intent of the referral is to not permit					
roadside parking or stopping anytime on Madison Lane.					
Classification - Implicatio		Mode of Response			
☐ Ministerial / Minor		☐ Memo	1		
☐ Land Use Policy			Requested Response Timeline		
☐ Social Policy		□ 2 weeks	\Box 2 weeks X 1 month \Box 6 weeks		
☐ Budget Policy		☐ Status reports until completed			
□ Other:		☐ Other: More time if needed ☐ Specific Date:			
ASSIGNMENT – Provided by CAO at Board Meeting. Copied to Board Offices and Department Head(s) Completed by CAO's Office:					
Department(s):	Referral	Referral Lead: County Co		Board Date:	
REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by					
CAO's Office:					
Department(s):	Referral	Lead:		Date:	
Public Works, Facilities and Parks	Randy Is	shii		2/08/22	
ANALYSIS - Completed by Department and copied to Board Offices and CAO:					
Department analysis of resources required/impact on existing department priorities to complete referral:					
· · · · · · · · · · · · · · · · · · ·			Department's Recommended Response Timeline		
	• •	By requested date			
D 4		\square 2 weeks		\Box 6 weeks \Box 6 months	
Date:		□ 1 year	☐ Other/ Specif	ric Date:	
REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:					
Referral Response Date:	Board Item No.:		Referrals List Deletion:		