



PROJECT INFORMATION FORM

Project Name McKinleyville Incorporation Initial Feasibility Analysis	Estimated Date of Completion: <u>10/31/2026</u> Grant Amount: <u>\$50,000</u> Estimated Total Project Cost: <u>\$50,000</u> <small>(State grant, other funds, and in-kind)</small>									
Grantee Name (with mailing address) County of Humboldt 825 5 th Street Room 112 Eureka, CA 95501	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">County Humboldt</td> <td colspan="2">Nearest City/Town Eureka</td> </tr> <tr> <td colspan="3">Project Address (or nearest cross street) 825 5th Street Room 112 Eureka, CA 95501</td> </tr> <tr> <td style="text-align: center;">Senate Dist. 2</td> <td style="text-align: center;">Assembly Dist. 2</td> <td style="text-align: center;">US Congressional Dist. 2</td> </tr> </table>	County Humboldt	Nearest City/Town Eureka		Project Address (or nearest cross street) 825 5 th Street Room 112 Eureka, CA 95501			Senate Dist. 2	Assembly Dist. 2	US Congressional Dist. 2
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Grantee's Representative Authorized in Resolution										
(Signature required at bottom of this page)										
Name: <u>Elishia Hayes</u> Phone: <u>707-445-7266</u>	Title: <u>County Administrative Officer</u> Email: <u>ehayes@co.humboldt.ca.us</u>									
Project Manager – Person with day-to-day responsibility for project (if different from authorized representative)										
Name: <u>Jessica Maciel</u> Phone: <u>707-445-7266</u>	Title: <u>Assistant County Administrative Officer/CFO</u> Email: <u>jmaciel@co.humboldt.ca.us</u>									
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The scope of this Project consists of the preparation of an Initial Feasibility Analysis (IFA) to evaluate the fiscal and operational feasibility of incorporating the community of McKinleyville. The IFA will provide an objective, high-level assessment of whether incorporation is financially and operationally viable and whether it merits further advancement through the Local Agency Formation Commission (LAFCo) process.										
I certify that the information in this Project Information Form, including all attachments, is complete and accurate.										
Signed:										
<u>Elishia Hayes</u> Print Name	<u>County Administrative Officer</u> Title									
<u>Enter date</u> Date										
Designee? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>(If yes, attach letter of designation from authorized representative.)</small>										