| ORDINANCE NO. 584 |  |
|-------------------|--|
|-------------------|--|

AN ORDINANCE OF THE BOARD OF SUPERVISORS OF THE COUNTY OF SHASTA SETTING AND AMENDING FEES TO BE CHARGED BY THE CLERK OF THE BOARD, PUBLIC HEALTH, AND THE SHERIFF'S DEPARTMENT

The Board of Supervisors of the County of Shasta ordains as follows:

SECTION 1. This ordinance establishes or amends the fees to be charged by the following departments or departmental divisions:

- (1) the Clerk of the Board (Attachment A);
- (2) the Public Health Department (Attachment B); and
- (3) the Sheriff's Department (Attachment C).

SECTION 2. This ordinance supersedes those portions of any prior ordinance or resolution setting any of the fees listed in Attachments A through C.

SECTION 3. This ordinance shall take effect and be in full force and effect from and after 30 days after its passage. The clerk shall cause this ordinance to be published as required by law.

DULY PASSED AND ADOPTED this 11th day of October, 1994, by the Board of Supervisors of the County of Shasta by the following vote:

AYES:

Supervisors Dickerson, Fust, Sullivan, and Wilson

NOES:

Supervisor Clarke

ABSENT:

None

Francie Sullivan, Chair
Board of Supervisors
County of Shasta
State of California

ATTEST:

CAROLYN TAYLOR

Clerk of the Board

County of Shasta

Denuty

\* Attachment B superceeded by Ordinance No. 597 on July 1, 1997. \* Attachment C superceeded by Ordinance No. 591 on February 20, 1996.

### **CLERK OF THE BOARD**

## FEE SCHEDULE

| Appeal Fees (Planning Items)                           |   | \$100                        |
|--|---|------------------------------|
| BOS Legalling Fee for Zonin                            | gs - Minor<br>Major                       | <b>\$ 65</b><br><b>\$190</b> |
| Fish and Game Document Ha                              | indling Fee                               | \$ 25                        |
| County Code Revisions (Semi                            | i-Annually)                               | \$ 35                        |
| Findings of Fact (Per Parcel)                          | - Assessment Appeals                      | \$ 35                        |
| Minutes of the Board of Supe<br>Self-addressed envelop |   | \$ 35/yr.                    |
|  | (with own cassette) (we provide cassette) | <b>\$</b> 10 <b>\$</b> 15    |
| Transcription (Hourly rate/Sa (Deposit of ½ of estin   | •   | Hourly Charge                |
| Photocopy Charge (Per Page)                            |   | \$ .50                       |
| Handling Fee - Recordation o                           | f Williamson Act Non-Renewal Application  | ons \$ 25                    |
| Certification of Documents -                           | Per Document (Non-County Departments)     | \$ 1.75                      |

### PROPOSED FEE ADJUSTMENTS

### BUDGET UNIT 401 - PUBLIC HEALTH

Public Health is submitting a fee resolution as part of the budget process. The additional revenues from these fees are not expected to exceed \$10,000. Public Health submitted a fee increase for FY 1993/94 which was never implemented. The Board selected certain fee schedules for study and adopted those fees but did not vote on a separate fee resolution as submitted by Public Health. The requested fee adjustments for FY 1994/95 are as follows:

| <u>test</u>   | CURRENT FEE               | PROPOSED FEE                          |
|---|---------------------------|---------------------------------------|
| International Travel Immunizations                        | \$11 + cost<br>of vaccine | \$15 + cost and malpractice insurance |
| TB Work Clearance   | 0                         | 20                                    |
| TB X-Ray Interpretation                                   | o                         | 12                                    |
| Prescriptions for International Travel                    | 20                        | 28                                    |
| Country Specific CDC Faxed International Travel Guideline |                           | <b>5</b>                              |
| Medical Review of Mobile Home Permit                      | 0                         | 10                                    |
| Gram Stain (Bacterial) VD                                 | 8                         | 12                                    |
| Pregnancy   | 8                         | 10                                    |
| Urine Dipstick  | 4                         | <b>5</b>                              |
| Wet Mount   | 8                         | 12                                    |
| Enteric Culture, Reference                                | 20                        | 25                                    |
| Tuberculosis - Culture Identification                     | 20                        | 25                                    |
| Bacteria Reference  | 20                        | 25                                    |
| Mycobacteriological Smear (TB)                            | 12                        | 18                                    |
| Mycobacteriological Culture                               | 44                        | 48                                    |
| Pinworm Exam  | 8                         | 12                                    |

# SHERIFF'S OFFICE NEW OR AMENDED FEES

### FY 1994-95

# Services/Enforcement

|    | <u>Service</u>                         | Current<br>Fee | Proposed<br>Fee |
|----|--|----------------|-----------------|
|    |  |                |                 |
| 1. | Junk dealer license renewal            | n/a            | \$45.00         |
| 2. | License to sell firearms renewal       | n/a            | \$45.00         |
| 3. | Concealed Weapon Permit (initial)      | \$75           | \$100¹          |
| 4. | Copies log reports (single page)       | n/a            | \$ 2            |
| 5. | Found property legal advertisement fee | n/a            | \$ 10           |
|    |  |                |                 |
|    | Custody Division                       |                |                 |
| 1. | Main Jail Housing/Daily Rate           | \$66.71        | \$60.71         |
| 2. | Detention Annex Housing/Daily Rate     | \$66.00        | \$59.21         |

¹ Includes \$66 DOJ/FBI fees

### SHERIFF'S OFFICE NEW FEES FY 1994-95

#### Coroner

|     | Service  | _       | Fee                           |
|-----|--|---------|-------------------------------|
| 1.  | Private autopsy (central nervous system only)                                | \$      | 600¹                          |
| 2.  | Private autopsy (chest only)   | \$      | 600 <sup>2</sup>              |
| 3.  | Private autopsy (abdomen only)   | \$      | 600³                          |
| 4.  | Private autopsy (any two options except full)                                | \$      | 1,000⁴                        |
| 5.  | Private morgue fee (central nervous system, chest, o abdomen autopsies only) | г<br>\$ | 150                           |
| 6.  | Private morgue fee (any two partial autopsy options)                         | \$      | 200                           |
| 7.  | Full body X-ray  | \$      | 65 <sup>5</sup>               |
| 8.  | Pathologist pre-trial conference time  | \$      | 180/hour                      |
| 9.  | Pathologist review and consultation time                                     | \$      | 81/hour                       |
| 10. | Pathologist testimony  | \$      | 1 <b>80/hour</b> <sup>6</sup> |
|     |  |         |                               |

Histology, serology, x-ray, and toxicology costs not included.

Histology, serology, x-ray, and toxicology costs not included.

Histology, serology, x-ray, and toxicology costs not included.

<sup>4</sup> Histology, serology, x-ray, and toxicology costs not included.

<sup>5</sup> Includes 5 films. Additional films @ \$2.00 each.

Testimony shall include conferences with District Attorney, staff trial preparation, testimony, and court waiting time.