

ALBANY CALIFORNIA



CITY OF ALBANY
1000 SAN PABLO AVENUE
ALBANY, CA 94706
www.AlbanyCA.org

REQUEST TO AMEND ADVISORY BODY WORK PLAN FORM

INSTRUCTIONS: ADVISORY BODIES ARE REQUIRED TO COMPLETE FORM
AND SUBMIT TO THE CITY COUNCIL VIA THE STAFF LIAISON

Attach additional pages as needed

DATE: _____

ADVISORY BODY: Parks and Rec Commission

STAFF LIAISON: Chelle Putzer

PROPOSED AMENDMENT TO WORK PLAN: Formulate
a recommendation (w/alternatives) to the City Council to
consider improving the median at Solano and Key Route
Avenues by (1) relocating the Shrine of Freedom,
(2) improving path to the World War II monument area
to increase disabled access, and (3) installing one or
more benches within the area vacated by the Shrine.

DOES THE PROPOSED AMENDMENT ADD TO THE ADVISORY BODY'S
OVERALL WORK LOAD? _____

Yes.

HOW WILL THE EXTRA WORK LOAD BE MANAGED?

The Commission will direct staff to submit all presentations
in writing in advance of its meetings.

WHAT IS THE ANTICIPATED TIMEFRAME FOR COMPLETION OF THE PROPOSED ITEM? _____

Implement by Veterans Day 2014 (or Memorial Day 2015).

EXPLAIN HOW THE AMENDMENT IS IN LINE WITH THE ADVISORY BODY'S ROLE AS DEFINED BY THE CITY COUNCIL:

The Park & Recreation Commission "advises the City Council
_____ on all matters of public recreation, public park
_____ facilities and public landscaping (including street trees and
_____ parkways) in the City" (City website); thus the proposal
_____ falls squarely within the commission's defined role.

See also Master Plan page 6 (attached).

PLEASE PROVIDE PRO/CON ANALYSIS REGARDING THE PROPOSED AMENDMENT:

1. Pro: the Solano/Key Route median improvement
_____ offers an opportunity to upgrade the city's
_____ most visible public space, both in terms of aesthetics and
_____ accessibility, without incurring significant expense.

2. Con: consideration of the issue may divert some
_____ commission time and energy from other priorities
_____ (planning for and monitoring other public spaces).

RECORD OF COUNCIL ACTION

ACTION TAKEN: _____

ATTEST: _____ DATE: _____

CITY CLERK