

TRANSMITTAL SHEET FOR  
NOTICE OF INTENDED ACTION

Control \_\_\_\_\_ Department or Agency \_\_\_\_\_  
Rule No. \_\_\_\_\_  
Rule Title: \_\_\_\_\_  
\_\_\_\_\_ New \_\_\_\_\_ Amend \_\_\_\_\_ Repeal \_\_\_\_\_ Adopt by Reference

Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety? \_\_\_\_\_

Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare? \_\_\_\_\_

Is there another, less restrictive method of regulation available that could adequately protect the public? \_\_\_\_\_

Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree? \_\_\_\_\_

Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule? \_\_\_\_\_

Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public? \_\_\_\_\_

Does the proposed action relate to or affect in any manner any litigation which the agency is a party to concerning the subject matter of the proposed rule? \_\_\_\_\_

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Does the proposed rule have an economic impact? \_\_\_\_\_

If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with subsection (f) of Section 41-22-23, Code of Alabama 1975.

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Certification of Authorized Official

I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabama 1975, and that it conforms to all applicable filing requirements of the Administrative Procedure Division of the Legislative Services Agency.

Signature of certifying officer \_\_\_\_\_

Date \_\_\_\_\_

(DATE FILED)  
(STAMP)

(Agency Name)  
(Agency Division, if applicable)

NOTICE OF INTENDED ACTION

AGENCY NAME:

RULE NO. & TITLE:

INTENDED ACTION:

SUBSTANCE OF PROPOSED ACTION:

TIME, PLACE, MANNER OF PRESENTING VIEWS:

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

CONTACT PERSON AT AGENCY:

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(Signature of officer authorized  
to promulgate and adopt  
rules or his or her deputy)

**CERTIFICATION OF ADMINISTRATIVE RULES  
FILED WITH THE LEGISLATIVE SERVICES AGENCY  
OTHNI LATHRAM, DIRECTOR**

(Pursuant to Code of Alabama 1975, §41-22-6, as amended).

I certify that the attached is/are correct copy/copies of rule/s as promulgated and adopted on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and filed with the agency secretary on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

AGENCY NAME: \_\_\_\_\_

\_\_\_\_\_ Amendment \_\_\_\_\_ New \_\_\_\_\_ Repeal (Mark appropriate space)

Rule No. \_\_\_\_\_

(If amended rule, give specific paragraph, subparagraphs, etc., being amended)

Rule Title: \_\_\_\_\_

ACTION TAKEN: State whether the rule was adopted with or without changes from the proposal due to written or oral comments:

NOTICE OF INTENDED ACTION PUBLISHED IN VOLUME \_\_\_\_\_,  
ISSUE NO. \_\_\_\_\_, AAM, DATED \_\_\_\_\_, 20\_\_\_\_.

Statutory Rulemaking Authority: \_\_\_\_\_

(Date Filed)  
(For LRS Use Only)

\_\_\_\_\_  
Certifying Officer or his or her  
Deputy

(NOTE: In accordance with §41-22-6(b), as amended, a proposed rule is required to be certified within 90 days after completion of the notice.

**CERTIFICATION OF EMERGENCY RULES  
FILED WITH LEGISLATIVE SERVICES AGENCY  
OTHNI LATHRAM, DIRECTOR**

Pursuant to Code of Alabama 1975, §§41-22-5(b) and 41-22-6(c) (2)a. and b.

I certify that the attached emergency (amendment, new rule, new chapter, repeal or adoption by reference) is a correct copy as promulgated and adopted on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

AGENCY NAME: \_\_\_\_\_

RULE NO. AND TITLE: \_\_\_\_\_

EFFECTIVE DATE OF RULE: \_\_\_\_\_

EXPIRATION DATE (If less than 120 days): \_\_\_\_\_

NATURE OF EMERGENCY:

STATUTORY AUTHORITY: \_\_\_\_\_

SUBJECT OF RULE TO BE ADOPTED ON PERMANENT BASIS \_\_\_\_\_ YES \_\_\_\_\_ NO

NAME, ADDRESS, AND TELEPHONE NUMBER OF PERSON TO CONTACT FOR COPY OF RULE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of officer authorized  
to promulgate and adopt rules and  
regulations or his or her deputy

FILING DATE  
(For APA Use Only)

**CERTIFICATION OF PEREMPTORY RULES  
FILED WITH THE  
LEGISLATIVE SERVICES AGENCY**

The \_\_\_\_\_  
(Name of Agency, Commission, Board, or Department)

certifies that the attached hereto is a true and correct copy of:

Rule No. and Title: \_\_\_\_\_

\_\_\_\_\_

which was duly (adopted, amended, or repealed) by peremptory  
rulemaking on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Statutory Authority: \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Certifying  
Officer



5. EFFECT OF THIS RULE ON EMPLOYMENT IN THE GEOGRAPHICAL AREA WHERE THE RULE IS TO BE IMPLEMENTED:
  
6. SOURCE OF REVENUE TO BE USED FOR IMPLEMENTING AND ENFORCING THIS RULE:
  
7. THE SHORT-TERM/LONG-TERM ECONOMIC IMPACT OF THIS RULE ON AFFECTED PERSONS, INCLUDING ANALYSIS OF PERSONS WHO WILL BEAR THE COSTS AND THOSE WHO WILL BENEFIT FROM THE RULE:
  
8. UNCERTAINTIES ASSOCIATED WITH THE ESTIMATED BENEFITS AND BURDENS OF THE RULE, INCLUDING QUALITATIVE/QUANTITATIVE BENEFITS AND BURDEN COMPARISON:
  
9. THE EFFECT OF THIS RULE ON THE ENVIRONMENT AND PUBLIC HEALTH:
  
10. DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE RULE IS NOT IMPLEMENTED:

**\*\*Additional pages may be used if needed.**

**TRANSMITTAL SHEET FOR  
BUSINESS ECONOMIC IMPACT STATEMENT  
(Section 41-22-5.1)**

Control No. \_\_\_\_\_ Department/Agency \_\_\_\_\_

Rule No. \_\_\_\_\_

Rule Title: \_\_\_\_\_

\_\_\_\_\_ New \_\_\_\_\_ Amend \_\_\_\_\_ Repeal \_\_\_\_\_ Adopt by Reference

Attached is a Business Economic Impact Statement filed pursuant to  
Section 41-22-5.1, Code of Alabama 1975.

Signature of Filing Officer \_\_\_\_\_

Date \_\_\_\_\_

(DATE FILED)  
(STAMP)