|  |  |  |
| --- | --- | --- |
|  | TEMPORARY RULE-MAKING **FINDINGS OF NEED**  **[Authority G.S. 150B-21.1]** | OAH USE ONLY **VOLUME:**  **ISSUE:** |

|  |  |
| --- | --- |
| **1. Rule-Making Agency:** | |
| **2. Rule citation & name:** | |
| **3. Action:**  **Adoption**  **Amendment**  **Repeal** | |
| **4. Was this an Emergency Rule:**  **Yes Effective date:**  **No** | |
| **5. Provide dates for the following actions as applicable:**  **a. Proposed Temporary Rule submitted to OAH:**  **b. Proposed Temporary Rule published on the OAH website:**  **c. Public Hearing date:**  **d. Comment Period:**  **e. Notice pursuant to G.S. 150B-21.1(a3)(2):**  **f. Adoption by agency on:**  **g. Proposed effective date of temporary rule if other than effective date established by G.S. 150B- 21.1(b)**  **and G.S. 150B-21.3:** | |
| **6. Reason for Temporary Action. Attach a copy of any cited law, regulation, or document necessary for the review.**  **A serious and unforeseen threat to the public health, safety or welfare.**  **The effective date of a recent act of the General Assembly or of the U.S. Congress.**  **Cite:**  **Effective date:**  **A recent change in federal or state budgetary policy.**  **Effective date of change:**  **A recent federal regulation.**  **Cite:**  **Effective date:**  **A recent court order.**  **Cite order:**  **Other:**  **Explain:** | |
| **7. Why is adherence to notice and hearing requirements contrary to the public interest and the immediate adoption of the rule is required?** | |
| **8. Rule establishes or increases a fee? (See G.S. 12-3.1)**  **Yes**  **Agency submitted request for consultation on:**  **Consultation not required. Cite authority:**  **No** | | |
| **9. Rule-making Coordinator:**  **Phone:**  **E-Mail:** | **10. Signature of Agency Head\*:**  **\* If this function has been delegated (reassigned) pursuant**  **to G.S. 143B-10(a), submit a copy of the delegation with this form.** |
| **Agency contact, if any:**  **Phone:**  **E-Mail:** | **Typed Name:**  **Title:**  **E-Mail:** |

|  |  |  |
| --- | --- | --- |
| RULES REVIEW COMMISSION USE ONLY | |  |
| Action taken:  Date returned to agency: | Submitted for RRC Review: | |