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| **1. Rule-Making Agency:** | | |
| **2. Administrative Code Chapter/Subchapter(s):** | | |
| **3. Agency Steps:**  **The agency made the initial classification on:**  **Report published on agency website:**  **Report published on OAH website:**  **Comment Period:**  **The agency made the final classification on:**  **The agency changed determination of rules in the report:**  **Yes. List rule citations:**  **No.**  **Date of RRC review scheduled per Rule 26 NCAC 05 .0211:**  **RRC granted agency request to change month and year of review.**  **New date for review:** | | |
| **4. Comments:**  **Public comments and agency response are contained in the report.**  **Public comments and agency response are attached to the report as separate documents.**  **The agency received no public comments.** | | |
| **5. Rule-making Coordinator:**  **Address:**    **Phone:**  **E-Mail:**  **Agency Contact, if any:**  **Phone:**  **E-Mail:** | **6. Signature of Agency Head\* or Rule-making Coordinator:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\*If this function has been delegated (reassigned) pursuant to**  **G.S. 143B-10(a), submit a copy of the delegation with this form.**  **Typed Name:**  **Title:**  **Email of Agency Head:** | |
| **RRC AND OAH USE ONLY** | | |
| **Action taken:**  RRC reviewed; sent to APO on:  RRC extended period of review.  New review date:  RRC returned incomplete report to agency.  Other: | |  |