

## NOTICE OF TEXT [Authority G.S. 150B-21.2(c)]

VOLUME:	
ISSUE:	

CHECK APPROPRIATE BOX:		
<ul> <li>Notice with a scheduled hearing</li> <li>Notice without a scheduled hearing</li> <li>Republication of text. Complete the following cite for the volume and issue of previous publication, as well as blocks 1 - 4 and 7 - 14. If a hearing is scheduled, complete block 5.</li> <li>Previous publication of text was published in Volume: Issue:</li> </ul>		
1. Rule-Making Agency:		
2. Link to agency website pursuant to G.S. 150B-19.1(c):		
3. Proposed Action Check the appropriate box(es) and list <u>rule citation(s)</u> beside proposed action:  ADOPTION:		
☐ AMENDMENT:		
☐ REPEAL:		
☐ READOPTION with substantive changes:		
☐ READOPTION without substantive changes:		
☐ REPEAL through READOPTION:		
4. Proposed effective date:		
5. Is a public hearing planned?		
If yes: Public Hearing date: Public Hearing time: Public Hearing location:		
6. If no public hearing is scheduled, provide instructions on how to demand a public hearing:		

7 F. I.'. D I. D I. D. I.(a).		
7. Explain Reason For Proposed Rule(s):		
	tive Review: If an objection is not resolved prior to the adoption of the	
	s Review Commission. If the Rules Review Commission receives written	
	2) from 10 or more persons clearly requesting review by the legislature	
	e rule will become effective as provided in G.S. 150B-21.3(b1). The	
Commission will receive written objections until 5:00 p.m. on the day following the day the Commission approves the rule. The Commission will receive those objections by mail, delivery service, hand delivery, or facsimile transmission. If you have any further		
questions concerning the submission of objections to the Commission, please call a Commission staff attorney at 984-236-1850.		
	•	
Rule(s) is automatically subject to legislative review. Cite statutory reference:		
9. The person to whom written comments may be submitted on the proposed rule(s):		
Name: Address:		
Address:		
Phone (optional):		
Fax (optional):		
E-Mail (optional):		
N. P. Communication of the Com		
10. Comment Period Ends:		
11. Fiscal impact. Does any rule or combination of rules in this notice create an economic impact? Check all that apply.		
State funds affected		
Local funds affected		
Substantial economic impact (≥\$1,000,000)		
☐ Approved by OSBM ☐ No fiscal note required		
12. Rule-making Coordinator:	13. The Agency formally proposed the text of this rule(s) on	
	Date:	
Phone:	44.00	
E-Mail:	14. Signature of Agency Head* or Rule-making Coordinator:	
Additional agency contact, if any:		
	Typed Name:	
Phone:	Title:	
E-mail:	*If this function has been delegated for the state of the	
	*If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.	
	O.S. 143D-10(a), subma a copy of the delegation with this form.	