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

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| **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:** |

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