TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

Control No. <u>850</u> Department : <u>Alabama S</u>	State Board of Social \	Nork Examiners
Rule No. 850-X-501 Method of Payment New X Amend	Repeal	Adopt by Reference
NewAmend	_ repeal	Adopt by Reletence
Would the absence of the proposed rule significant harm or endanger the public health, welfare, or sa	ntly afety?	No
Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare?		No
Is there another, less restrictive method of regulation available that could adequately protect the public?		No
Does the proposed rule have the effect of directly Or indirectly increasing the cost of any goods or Services involved and, if so, to what degree?		No
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?		NA_
Are the facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public?	d	Yes

Does the proposed rule have an economic impact	?	Νo
If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with the subsection (f) of Section 41-22-23, <u>Code of Alabama 1975</u> .		
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Certification of Authorized Official		
I certify that the attached proposed rule has been Title 41, <u>Code of Alabama 1975</u> , and that it confor Procedure Division of the Legislative Reference S	ms to all applicable fili	
Signature of certifying officer	Jolden	
Date 7-12-16		

(DATE FILED) (STAMP)

Alabama State Board of Social Work Examiners

NOTICE OF INTENDED ACTION

AGENCY NAME:

Alabama State Board of Social Work Examiners

RULE NO. & TITLE:

850-X-5-.01 Method of Payment

INTENDED ACTION:

Removing the reference to 850-X-1-.19

SUBSTANCE OF PROPOSED ACTION:

Removing reference to 850-X-1-.19

TIME, PLACE, MANNER OF PRESENTING VIEWS:

A Public Hearing will be held September 8, 2016, 9:30AM, 100 North Union Street, Suite 300, Montgomery AL 36104

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

Written comments may be sent to Alabama State Board of Social Work Examiners at: 100 North Union Street, Suite 736, Montgomery AL 36130-1620. All written comments must be received by 4:30PM September 7, 2016.

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CONTRACT PERSON AT AGENCY:

Brenda W. Holden, 334/242-5860

Signature of Officer

CHAPTER 850-X-5 FEES

850-X-5-.01 Method of Payment. Fees shall be payable to the Alabama State Board of Social Work Examiners. Payment of fees should be made by money order, credit card accepted by the state, company or cashier's checks. No cash will be accepted as payment of fees. Applications not accompanied by the proper fee will be returned to the applicant. Author: Alabama Board of Social Work Examiners

Statutory Authority: Code of Ala. 1975, §§34-30-57(4) (1991); 41-22-4(a)(2) (1991).

History: Repealed and Replaced: Filed October 31, 1997; Operative December 5, 1997; effective January 1, 1998; March 8, 2007; effective April 12, 2007 (See Rule 850 X-1-.19).