CAPITAL PROJECT

210253

| Ordinance Fiscal Note | | | Ordinance Number | |
|--|-----------------------------|--|--|-------------------|
| Ordinance Title (in Brief) | | | | |
| Finalize an agreement to fund the improv | ements to sig | nalize the inters | section of NE 108 | Sth Street and NE |
| Cookingham Drive (MO 291). | | | | |
| Is this ordinance for the following: | [| X New Constructio Replacement Repair | n | |
| Was this project programmed in the Five-Year | Capital Improve | ement Plan? | XNo FY | Yes |
| If no, please detail the reasons why this project of All non-City sources of funding. | was not included | and need for prese | ent funding request. | _ |
| Please identify source of funds below. Non-City source and amount. Source of Funds: Fiscal Year Funded Amount of Non-City Funds: | 21-3090-8959 21-3090-895 | | Star Development Shoal Creek TIF - MoDOT - | |
| City source and amount. Acct #: Name of Fund: Fiscal Year Funded Amount of City Funds: | | \$ | | |
| If ordinance is for new construction or replace Total estimated costs (design through constructi | | \$ \$202,000.00 | Tollowing informati | — — |
| Estimated lifespan of project in years | | 40 | | |
| Estimated annual operating and maintenance costs (Please detail type of maintenance or operating costs needed, additional | | \$ \$0.00 staffing, capital main | tenance costs, utilities, | etc.) |
| | | | | |
| Are these O&M costs reflected in the current budget? If yes, please provide source of funds. | | | XNo | Yes |
| If no, please identify year in which additional ope | erating and main | tenance costs will t | oe needed. | FY N/A |
| Reference Numbers: (Previously approved legislatio | n): | | | |
| Reviewed by: | | OMB Ar | oproval Date | |