## **OPERATING/PROGRAMMATIC** 120914 **Legislative Fiscal Note Ordinance Number** Ordinance Title (in Brief) Fair Housing Assistance Program U.S. Department of Housing and Urban Development (HUD) x No Does this Legislation Estimate New or Additional Revenues to the City? If yes, please identify in which Fund these revenues will be deposited (e.g. General, Sales Tax) and provide the following revenue information: **Revenue Detail** FY 2011-12 FY 2012-13 General Fund Special Revenue \$ Enterprise \$ Total: (Please detail type of revenue (fees, grants, tax) and change that will occur as a result of this legislation. Provide multi-year estimates if known or, if grant revenue, please identify source of funds (federal or state) and duration of grant support.) Does this Legislation increase appropriations in the current budget? If Yes, please complete the following budget information: **Expense Detail** FY 2011-12 FY 2012-13 General Fund 167.512 Special Revenue \$ Enterprise/Other 0 Total: 167,512 Please detail the extent to which these increased appropriations will be of a permanent nature (e.g. number of additional staff, facilities, long-term contracts) Does this Legislation expand the scope of current city services? (Please detail estimated number of people to be served, who is currently delivering services to that population, service performance expectations and, if grant supported, provisions for support if grant support ends.) X No Is this legislation the result of a federal or state legislative mandate? (If yes, please detail the purpose and source for that mandate). Reviewed by: Office of Management and Budget **OMB Approval Date**

OPERATING/PROGRAMMATIC					
Legislative Fiscal Note			Ordinance Number		
_					
Ordinance Title (in Brief)					
US Equal Employment	Opportunity Commiss	sion			
Does this Legislation Estimate	Now or Additional Payonu	ios to the City	,o	□No	X Yes
If yes, please identify in which and provide the following rev	Fund these revenues will be	-		ш	
Revenue Detail		FY 2	2005-06	FY 2006	6-07
General Fund		\$	27,145	\$	
Special Revenue		\$		\$	
Enterprise		\$		\$	
	Total:	\$	27145	\$	0
(Please detail type of revenue (fee estimates if known or, if grant reve This is an EEOC Grant that	nue, please identify source of fur	nds (federal or s	state) and dura	ation of grant sup	-
Does this Legislation increase If Yes, please complete the foll		ent budget?		No	X Yes
Expense Detail		FY 2	2005-06	FY 2006	6-07
General Fund		\$	27,145	\$	
Special Revenue		\$		\$	
Enterprise/Other		\$		\$	
	Total:	\$	27145	\$	0
Please detail the extent to which the additional staff, facilities, long-term	nese increased appropriations wi	ill be of a perma	nent nature (e	e.g. number of	
Does this Legislation expand to (Please detail estimated number of performance expectations and, if g	f people to be served, who is cur	rently delivering		X <b>No</b> nat population, se	Yes
Is this legislation the result of (If yes, please detail the purpose a	_	e mandate?		X No	Yes
Reviewed by:			01.2	ID:	
Office of Management and Budget			OIVIB App	roval Date	

CAPITAL PROJECT	
Ordinance Fiscal Note	Ordinance Number
Ordinance Title (in Brief)	
Is this ordinance for the following:	New Construction Replacement Repair
Was this project programmed in the Five-Year Capital Impro If yes, please identify year in which this project was funded.	vement Plan? No Yes
If no, please detail the reasons why this project was not include	ed and need for present funding request.
Does this project leverage non-city funds for design/could like the leverage non-city funds for design like	onstruction? No Yes
If no, please identify source and amount of city funds.	
If ordinance is for construction or replacement of asset plea  Total estimated costs (design through construction):	se provide the following information:
Estimated lifespan of project in years	\$
Estimated annual operating and maintenance costs (Please detail type of maintenance or operating costs needed, addition	\$
Are these O&M costs reflected in the current budget?	☐ No ☐ Yes
If yes, please please provide source of funds.	
If no, please identify year in which additional operating and ma	ntenance costs will be needed. FY
Reference Numbers: (Previously approved legislation):	
Reviewed by:	
Office of Management and Budget	OMB Approval Date