

GENERAL

Ordinance Fact Sheet

Ordinance Number

Brief Title

**Appropriating funds and
estimating revenue**

Approval Deadline

Reason

Appropriate funds and estimate revenue

Details

Reason for Legislation

Estimating revenues for expenditures that have already transpired for activities detailed in the 2014 and 2015 Action Plans.

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

These funds will be used to entered into a contract with Rose Hill Apartments and to amend an existing contract with Sheffield Place. These projects were identified in the 2014 and 2015 Action Plans.

Is it good for the children? Yes

How will this contribute to a sustainable Kansas City?

The funds will be used to construct or rehabilitate housing for low to moderate income persons.

Positions/Recommendations

Sponsor	
Programs, Departments, or Groups Affected	
Applicants / Proponents	<p>Applicant</p> <p>Neighborhoods and Housing City Department</p> <p>_____ Department</p> <p>_____ Department</p> <p>Other</p>
Opponents	<p>Groups or Individuals</p> <p>None Known</p> <p>Basis of opposition</p>
Staff Recommendation	<p><input checked="" type="checkbox"/> For</p> <p><input type="checkbox"/> Against</p> <p>Reason Against</p>
Board or Commission Recommendation	<p>By</p> <p><input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No action taken</p> <p><input type="checkbox"/> For, with revisions or conditions (see details column for conditions)</p>
Council Committee Actions	<p><input type="checkbox"/> Do pass</p> <p><input type="checkbox"/> Do pass (as amended)</p> <p><input type="checkbox"/> Committee Sub.</p> <p><input type="checkbox"/> Without Recommendation</p> <p><input type="checkbox"/> Hold</p> <p><input type="checkbox"/> Do not pass</p>

(Continued on reverse side)

Details

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Policy/Program Impact

Policy or Program Change	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

Finances

Cost & Revenue Projections -- Including Indirect Costs	
Financial Impact	
Fund Source (s) and Appropriation Account Codes	2940-570001-476050-G57HOME14 2940-575326-B-G57HOME14

(Use this space for further discussion, if necessary)

Applicable Dates:

Fact Sheet Prepared by:

Name _____ Date _____
Title _____

Reviewed by:

Name _____ Date _____
Title _____

Reference Numbers

CONTRACT



Ordinance Fact Sheet

Construction/Misc. Form

Brief Title	Approval Deadline	Reason
_____	_____	To authorize execution of _____ contract.

Details

Reason for Contract
 Note: Same information as ordinance title.

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

Project Justification

Project Description
 The contract will

Solicitation
 This Project was advertised in accordance with the City's requirements including the City's webpage.

Project Management Costs
 Project Management Costs are not estimated to exceed \$271,000.
 OR
 The total Project cost is estimated at \$_____.
 Project Management Costs are estimated at \$_____.
 Direct Internal - \$_____
 Indirect Internal - \$_____
 Consultant Services - \$_____

Roles and Responsibilities

Sponsor	Department
Department or Programs Affected	Department
Recommended Awardee	Company
Contract Compliance Certification Obtained?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Opponents	Groups or Individuals Reason for Opposition
Responsibilities	Design Engineering: Inspections: Construction or Project Management: Service Monitoring:

Policy/Program Impact

Policy or Program Emphasis Change	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

(Continued on reverse side)

Details

Human Relations Approval
 MBE/WBE subcontracting plan was approved by the Human Relations Department on _____, 1997. Docket memo attached.

Grant Funding
 This contract is part of the _____ Grant Program which cover ___ % of eligible costs. The remaining ___ % will be funded by _____ Funds.

Youth Employment Program
 A quarter of percent (0.25%) of this contract has been contributed to the Youth Employment Program.

1% for Art
 One percent of this contract has been contributed to the 1% for Art Program.

Is it good for the children?

How will this contribute to a sustainable Kansas City?
 [Enter concise sustainability information.]

Fairness in Construction Board
 There is no appeal on this contract pending before the Fairness in Construction Board.
 OR
 _____ Company has an appeal pending before the Board at this time.

Estimated Duration of Contract:

Fact Sheet Prepared by: _____ Date: _____
Name
Title

Reviewed by: _____ Date: _____
Name
Title

Reference Numbers:

Finances

City's Estimate of Cost	\$
Bid or Proposal Data	<i>Lowest Contract Cost Submitted</i> \$ <i>No. of Proposals Considered</i> <i>Reason for rejecting lowest contract cost submitted</i>
Other Bidders or Contractors Considered	Contract Costs Submitted
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
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	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Fund Sources and Appropriation Account Codes For This Contract	19__ Budget, Page ____ Unbudgeted, Appropriation Fund _____ 00-000-00-0000-A0000
Source of Future Operating Funds	
Maximum Amount of Proposed Contract	\$
Amount of Contingency	\$
Engineering & Administration	\$
TOTAL	\$

Council Committee Actions

Do Pass Hold
 Do Pass (as amended) W/o Recommendation
 Committee Sub. Do Not Pass

CONTRACT



Ordinance Fact Sheet

A-E/Negotiated Form

Brief Title	Approval Deadline	Reason
		To authorize execution of agreement.

Details

Reason for Contract
Note: Same information as ordinance title.

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

Project Justification

Project Description

The agreement will

Solicitation

Roles and Responsibilities

Sponsor	Department
Department or Programs Affected	Department
Recommended Awardee	Company
Contract Compliance Certification Obtained?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Opponents	Groups or Individuals Reason for Opposition
Responsibilities	Design Engineering: Inspections: Construction or Project Management: Service Monitoring:

Policy/Program Impact

Policy or Program Emphasis Change	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

Details

Consultant Selection

This Contractor was selected in accordance with the Kansas City Contract Central requirements; a Notice was posted on the Kansas City Webpage and advertised in accordance with City requirements.

Human Relations Approval

MBE/WBE subconsulting plan was approved by the Human Relations Department on _____, 1997. Docket memo attached.

Grant Funding

This contract is part of the _____ Grant Program which cover ___ % of eligible costs, The remaining ___ % will be funded by _____ Funds.

Is it good for the children?

How will this contribute to a sustainable Kansas City?

[Enter concise sustainability information.]

Estimated Duration of Contract:

Finances

City's Estimate of Cost	\$
Bid or Proposal Data	<i>Lowest Contract Cost Submitted</i> \$ NA FOR A-E
	<i>No .of Proposals Considered</i> A-E
	<i>Reason for rejecting lowest contract cost submitted</i>
Other Bidders or Contractors Considered	Contract Costs Submitted
	\$ NA FOR A-E
	\$
	\$
	\$
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	\$
	\$
	\$
	\$
	\$
	\$
\$	
Fund Sources and Appropriation Account Codes For This Contract	19__ Budget, Page ____ Unbudgeted, Appropriation Fund _____ Fund 00-000-00-0000-A0000
Source of Future Operating Funds	
Maximum Amount of Proposed Contract	\$
Amount of Contingency	\$
Engineering & Administration	\$
TOTAL	\$

Fact Sheet Prepared by: _____ Date: _____

Name
Title

Reviewed by: _____ Date: _____

Name
Title

Reference Numbers:

Council Committee Actions

Do Pass	<input type="checkbox"/>	<input type="checkbox"/>	Hold
Do Pass (as amended)	<input type="checkbox"/>	<input type="checkbox"/>	W/o Recommendation
Committee Sub.	<input type="checkbox"/>	<input type="checkbox"/>	Do Not Pass

CONTRACT

Ordinance Fact Sheet

Amendment Form



Brief Title	Approval Deadline	Reason
		To authorize execution of _____ agreement.

Details

Reason for Contract
Note: Same information as ordinance title.

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

Project Justification

Project Description

The agreement will

Contract History

Roles and Responsibilities

Sponsor	Department
Department or Programs Affected	Department
Recommended Awardee	Company
Contract Compliance Certification Obtained?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Opponents	Groups or Individuals Reason for Opposition
Responsibilities	Design Engineering: Inspections: Construction or Project Management: Service Monitoring:

Policy/Program Impact

Policy or Program Emphasis Change	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

Details

Human Relations Approval
 MBE/WBE subconsulting plan was approved by the Human Relations Department on _____, 1997. Docket memo attached.

Grant Funding
 This contract is part of the _____ Grant Program which cover ___ % of eligible costs, The remaining ___ % will be funded by _____ Funds.

Is it good for the children?

How will this contribute to a sustainable Kansas City?
 [Enter concise sustainability information.]

Estimated Duration of Contract:

Fact Sheet Prepared by: _____ Date: _____
 Name
 Title

Reviewed by: _____ Date: _____
 Name
 Title

Reference Numbers:

Finances

City's Estimate of Cost	\$
Bid or Proposal Data	<i>Lowest Contract Cost Submitted</i> \$ NA FOR AMENDMENT <i>No. of Proposals Considered</i> <i>Reason for rejecting lowest contract cost submitted</i>
Other Bidders or Contractors Considered	Contract Costs Submitted \$ NA FOR AMENDMENT \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Fund Sources and Appropriation Account Codes For This Contract	19__ Budget, Page ____ Unbudgeted, Appropriation _____ Fund 00-000-00-0000-A0000
Source of Future Operating Funds	
Maximum Amount of Proposed AMENDMENT	\$
Amount of Contingency	\$
Engineering & Administration	\$
TOTAL	\$

Council Committee Actions

Do Pass	<input type="checkbox"/>	<input type="checkbox"/> Hold
Do Pass (as amended)	<input type="checkbox"/>	<input type="checkbox"/> W/o Recommendation
Committee Sub.	<input type="checkbox"/>	<input type="checkbox"/> Do Not Pass

BUDGET ADJUSTMENT

Ordinance Fact Sheet

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Ordinance Number

Brief Title

Approval Deadline

Reason

Details

Reason for Adjustment

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

Is it good for the children?

How will this contribute to a sustainable Kansas City?

[Enter concise sustainability information.]

Department, Program, or Accounts Affected

Sponsor

From/Transferor(s) or Fund Title(s)

To/Transferee(s) or Fund Title(s)

Policy / Program Impact

Policy or Program
Emphasis Change

No Yes

Operational
Impact
Assessment

Council Committee Actions

Do Pass Hold
 Do Pass (as amended) w/o Recommendation
 Committee Sub. Do Not Pass

Fact Sheet prepared by: _____ Date _____

Fact Sheet reviewed by: _____ Date _____

Reference Numbers