FISCAL IMPACT STATEMENT

Indicate the **Total Fiscal Impact** of the action requested, including personnel, operating, and capital costs. Indicate costs for the current fiscal year and continuing costs in future years. Include all related costs necessary to place the asset in service.

1. DESCRIPTION: To celebrate a life, Leu Gardens offers 2 Outdoor Garden Memorial options. Memorials with up to 25 guests includes a 2-hour reserved outdoor site for \$250.00. Memorials with up to 180 guests includes a 2-hour reserved outdoor site for \$500.00.

COSTS:

2. Does the acceptance of this action require the hiring of additional or new personnel or the use of overtime? \Box Yes \boxtimes No (if Yes, include all personnel costs below).

3. Is the action funded in the current year budget and/or through reallocation of existing Department resources: $\$ Yes $\$ No If No, how will this item be funded? _____ PLEASE NOTE: If the action is funded by a grant received by the City please include the fiscal year of the funding award, grantor name, granting agency or office name (if any), grant name and when the grant agreement was approved by City Council.

Did this item require BRC action? 🗌 Yes 🛛 No 🛛 If Yes, BRC Date: _____ BRC Item #: _____

4. This item will be charged to Fund/Dept/Program/Project: <u>LEU0001</u> C.

5.	(a) Current <u>Year Estimate</u>	(b) Next Year <u>Annualized</u>	(c) Annual Continuing <u>Costs Thereafter</u>
Personnel	\$0.00	\$0.00	\$0.00
Operating	0.00	0.00	0.00
Capital	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Total	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

6. If costs do not continue indefinitely, explain nature and expiration date of costs:

7. OTHER COSTS

(a). Are there any future costs, one-time payments, lump sum payments, or other costs payable for this item at a later date that are *not* reflected above: \Box Yes \boxtimes No

(b) If yes, by Fiscal Year, identify the dollar amount and year payment is due: \$ _____ Payment due date _____

(c) What is the nature of these costs:

REVENUE:

8. What is the estimated increase in "valuation" added to the tax rolls? $\frac{N/A}{A}$. Tax roll_increase is:

real property, tangible personal property, other (identify _____).

9. What is source of the revenue and the estimated annual recurring revenue? Source: <u>The Outdoor Garden Memorial</u> fees will generate approximately: a.) \$5,000.00 in estimated revenue based on guests inquiring and wanting the tranquil and beautiful settings of the Gardens as a another alternative to celebrate a life. \$ 5,000.00

10. If non-recurring, what is the estimated Fiscal Year and amount of non-recurring revenue that will be realized? Source <u>N/A</u> Fiscal year ______ \$ _____ non-recurring revenue

11. What is the Payback period? Not Applicable years

12. JUSTIFICATION: Document justification for request. Include anticipated economies or efficiencies to be realized by the City, including reductions in personnel or actual cost (cash flow) reductions to be realized in your budget.

The Harry P. Leu Gardens Board approved the 2 Outdoor Garden Memorial options and fees. Outdoor Garden Memorials will offer an additional choice to guests celebrating the life of a loved one in a restorative tranquil setting.

13. APPROVED: <u>Robert Bowden</u> (Submitting Director or authorized Division Mgr **Only**) FIS 3/14/08