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.

| i. description: <u>Grant Awar</u> New BWC Program for Mi | | | I Implementation Program: Implementation of |
|--|--|---|---|
| COSTS: | | | |
| 2. Does the acceptance of the Yes No (if Yes, included) | | | ew personnel or the use of overtime? |
| Yes No If No, how Agreement pending approved NOTE: If the action is fur grantor name, granting age City Council. | will this item be funde al by City Council on aded by a grant receivency or office name (i | d? Award through Dep October 19, 2015. Aw yed by the City please f any), grant name and | tion of existing Department resources: partment of Justice, Office of Justice Programs: vard Period: 10/01/2015 - 09/30/17. PLEASE include the fiscal year of the funding award, d when the grant agreement was approved by |
| Did this item require BRC | | | |
| 4. This item will be charged | l to Fund/Dept/Program | m/Project: 1130 F/OPI | <u>D/TBD</u> . |
| 5. | (a) Current <u>Year Estimate</u> | (b) Next Year <u>Annualized</u> | (c) Annual Continuing <u>Costs Thereafter</u> |
| Personnel Operating Capital Total | \$ \$2,480.00 \$495,000.00 \$497,480.00 | \$ | \$ |
| 6. If costs do not continue i | ndefinitely, explain na | ture and expiration date | e of costs: |
| 7. OTHER COSTS | | | |
| (a). Are there any future codate that are <i>not</i> reflected a | | s, lump sum payments, | or other costs payable for this item at a later |
| (b) If yes, by Fiscal Year, id | dentify the dollar amou | ant and year payment is | s due: \$ Payment due date |
| (c) What is the nature of the | ese costs: | | |
| REVENUE: | | | |
| 8. What is the estimated inc ☐ real property, ☐ tangi | | | Tax roll_increase is:). |
| 9 . What is source of the rev | enue and the estimated | d annual recurring rever | nue? Source: \$ |
| 10 . If non-recurring, what i Source Fiscal year _ | | | n-recurring revenue that will be realized? |
| 11. What is the Payback pe | riod? years | | |
| the City, including reductio Body Worn Camera Pilot I | ns in personnel or actumplementation programation programation Police Department | nal cost (cash flow) reduced the cost (cash flow) and (BWC PIP) will supported. The 50 percent in-lateral cash. | d economies or efficiencies to be realized by uctions to be realized in your budget. The port the implementation of body-worn camera kind or cash match is funded through |

13. APPROVED: <u>John Mina, Chief of Police</u> (Submitting Director or authorized Division Mgr **Only**) FIS 3/14/08