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:** Requesting to budget for the Assistance to Firefighters Grant (AFG) 2013 amounting to a total of \$141,898 to fund the OFD GOLD Officer Development Program toprotect the health and safety of the public and firefighting personnel against fire and fire-related hazards. There is a 10% matching funds required by this grant amounting to \$14,189 for the City and funding will come from OFS 0005 C Cost Center. The 90% of the grant amounting to \$127,709 will be funded by the U.S Department of Homeland Security, FEMA. The time period for this grant starts from June 20, 2014 and ends on June 19, 2015. Administrative authorization was given to submit to meet deadline, but it is subject to July 28, 2014 City Council action.

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Costs:							
2. Does the acceptance of Yes ⊠ No (if Yes, inc			or new personnel or the use	e of overtime?			
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? X Yes No	If Yes, BRC Date: <u>T</u>	BD BRC Item #: TBD				
4. This item will be charge	ed to Fund/Dept/Program	n/Project: <u>Award in gra</u>	nt fund 1130; match in OFD O	FS 0005_C.			
5.	(a) Current <u>Year Estimate</u>	(b) Next Year <u>Annualized</u>	(c) Annual Continuing <u>Costs Thereafter</u>				
Personnel Operating Capital Total	\$35,475 0 0 \$35,475	\$106,423 0 <u>\$0</u> <u>\$106,423</u>	\$0 0 <u>0</u> <u>0</u>				

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

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- (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: Yes No
- (b) If yes, by Fiscal Year, identify the dollar amount and year payment is due: \$ 0 Payment due date 0
- (c) What is the nature of these costs: N/A

REVENUE:

- 8. What is the estimated increase in "valuation" added to the tax rolls? \$ 0. 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: N/A \$ 0
- 10. If non-recurring, what is the estimated Fiscal Year and amount of non-recurring revenue that will be realized? Source N/A Fiscal year N/A \$ 0 non-recurring revenue
- 11. What is the Payback period? 0 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. Requesting to budget for the Assistance to Firefighters Grant (AFG) 2013 amounting to a total of \$141,898 to fund the OFD GOLD Officer Development Program toprotect the health and safety of the public and firefighting personnel against fire and fire-related hazards. There is a 10% matching funds required by this grant amounting to \$14,189 for the City and funding will come from OFS 0005 C Cost Center. The 90% of the grant amounting to \$127,709 will be funded by the U.S Department of Homeland Security, FEMA. The time period for this grant starts from June 20, 2014

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