## 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.

## **<u>1. Description: Agreement</u>** with the University of South Florida Board of Trustees for the University of Florida's Center for Urban Transportation

**2**. Does the acceptance of this action require the hiring of additional or new personnel or the use of overtime? X Yes 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 X No If No, how will this item be funded? Expenditures will be reimbursed by the University of South Florida under the terms and conditions of FDOT project two #945-001 Contract #BDV25. 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 X No If Yes, BRC Date: TBD BRC Item #: TBD

4. This item will be credited to Fund/Dept/Program/Project: 1130\_F/OPD/TBD

5.	(a) Current <u>Year Estimate</u>	(b) Next Year <u>Annualized</u>	(c) Annual Continuing <u>Costs Thereafter</u>
Personnel	\$59,601.50	N/A	N/A
Operating	0	0	0
Capital	0	0	0
Total	\$59,601.50	0	0

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 X 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? \$ \_\_\_\_\_. Tax roll\_increase is: real property, tangible personal property, other

9. What is source of the revenue and the estimated annual recurring revenue? Source:

**10**. If non-recurring, what is the estimated Fiscal Year and amount of non-recurring revenue that will be realized? Source University of South Florida, through a Task Work Order from Florida Department of Transportation Fiscal year 2014/2015 non-recurring revenue

11. What is the Payback period? \_\_\_\_\_ 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 City of Orlando Police Department will provide law enforcement support to enhance a comprehensive safety campaign that promotes safe pedestrian, bicyclist and driver behavior. The reimbursable period begins upon execution of the contract until on or before May 31, 2015 for a maximum amount of \$59,601.60.

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