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: Small Business Facade Program Agreement between 1013 Colonial Ventures, LLC

and the City of Orlando

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 \boxtimes 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: 0001_F General Fund/EDV/EDV0002_C.

5.	(a) Current <u>Year Estimate</u>	(b) Next Year <u>Annualized</u>	(c) Annual Continuing <u>Costs Thereafter</u>
Personnel	\$	\$	\$
Operating	\$14,863.14		
Capital			
Total	<u>\$14,863.14</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? \$ _____. Tax roll_increase is: real property, langible personal property, other (identify _____).

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 ______ Fiscal year ______ \$ _____ 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 Small Business Façade Program (SBFP) is an economic development program designed to provide new and existing commercial property and business owners in the City of Orlando assistance with costs related to exterior physical improvements. The SBFP offers funds to off-set the costs of facade and streetscape improvements. Under the program, the City will loan 50% of the total project cost. The maximum amount loaned under the program guidelines is not to exceed \$20,000.Total eligible project costs for 1013 Colonial Ventures, LLC under the Small Business Façade Program are \$29,726.28. Applicant is requesting \$14,863.14. The project will include a total recreation of the Cameo Theater sign.

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