## 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:** Removal of old play equipment and construction of new playground, and site furnishings at Engelwood Neighborhood Center. Construction costs up to \$110,983 will be paid for through CDBG funds in cost center FPR0005 P with the remaining funds of \$68,017 from FPR0004 P and FPR operating budget, as necessary.

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5.	(a) Current	(b) Next Year	(c) Annual Continuing			
<b>4.</b> This item will be charged to Fund/Dept/Program/Project: <u>0005_F/FPR0005_P, FPR0004_P</u> .						
Did this item require BRC	Caction? ⊠ Yes □ No	o If Yes, BRC Date: 0	4/14/2015 BRC Item #: 4B			
action is funded by a gra	ant received by the Cit	y please include the fisc	cal year of the funding aware greement was approved by Ci	d, grantor name,		
<b>3.</b> Is the action funded i ☐ Yes ☐ No If No, how			allocation of existing Depart	tment resources: SE NOTE: If the		
2. Does the acceptance of Yes ⊠ No (if Yes, income			or new personnel or the u	se of overtime?		

5.	(a) Current <u>Year Estimate</u>	(b) Next Year <u>Annualized</u>	(c) Annual Continuing <u>Costs Thereafter</u>
Personnel	\$0	\$0	\$0
Operating	0	0	0
Capital	<u>\$179,000</u>		
Total	<u>\$179,000</u>	<u>\$0</u>	<u>\$0</u>

**6**. If costs do not continue indefinitely, explain nature and expiration date of costs: Costs are for the construction of a new playground and amenities at Engelwood Neighborhood Center.

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

## REVENUE:

- 9. What is source of the revenue and the estimated annual recurring revenue? Source: N/A \$ N/A
- 10. If non-recurring, what is the estimated Fiscal Year and amount of non-recurring revenue that will be realized? Source  $\underline{N/A}$  Fiscal year  $\underline{N/A}$  \$\frac{N/A}{A}\$ non-recurring revenue
- 11. What is the Payback period? N/A 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. Approval of this request will support City Recreation Division's after school and summer programs for children at the Engelwood Neighborbood Center.
- **13. APPROVED:** <u>Lisa Early</u> (Submitting Director or authorized Division Mgr **Only**) FIS 3/14/08