

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: Purchase of (78) new Club Car Precedent i2 Excel Electric Golf Cars, (1) new Cafe Express Beverage Car, and (1) new Precedent 4-Fun Passenger Vehicle to replace existing Golf Cart Fleet. This will piggyback on the City of Kansas City / US Communities Contract No. EV2024-02. This request presumes that the existing fleet will be traded back to the awarded vendor.

COSTS:

2. Does the acceptance of this action require the hiring of additional or new personnel or the use of overtime?
☐ 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 ☐ 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: 0016 F/DUB/DUB0003 C -- R&R.

5.	(a) Current Year Estimate	(b) Next Year Annualized	(c) Annual Continuing Costs Thereafter
Personnel	\$	\$	\$
Operating	\$0	\$0	\$0
Capital	<u>\$201,939</u>	<u>\$</u>	<u>\$</u>
Total	<u>\$201,939</u>	<u>\$0</u>	<u>\$0</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: ☐ Yes ☒ No

(b) If yes, by Fiscal Year, identify the dollar amount and year payment is due: \$ N/A Payment due date _____

(c) What is the nature of these costs: N/A

REVENUE:

8. What is the estimated increase in "valuation" added to the tax rolls? \$ N/A. Tax roll increase is:

☐ real property, ☐ tangible personal property, ☐ other (identify N/A).

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. Due to the expiring warranties on the current fleet, the replacement is necessary to keep maintenance costs at a minimum. Additionally, the timely replacement of the carts will result in favorable tradein values on the existing fleet

13. APPROVED: Chris McCullion, Chief Financial Officer, Office of Business and Financial Services (Submitting Director or authorized Division Mgr **Only**)

FIS 3/14/08