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: <u>Small Business Facade Program Agreement between Tamhara's Secret Corp and the City of Orlando</u> 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: \Box 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: <u>0000_1_F General Fund/EDV/EDV0002/_C</u>.

5.	(a) Current <u>Year Estimate</u>	(b) Next Year <u>Annualized</u>	(c) Annual Continuing <u>Costs Thereafter</u>
Personnel	\$	\$	\$
Operating	\$14,000		
Capital			
Total	<u>\$14,000</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, tangible 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 SBFP is an interest free deferred loan for facade improvements to new and existing commercial property and business owners in the City of Orlando. The program, which was approved by the City Council on November 13, 2006, provides assistance with costs related to exterior physical improvements. The SBFP offers matching loan funds to off-set the costs of design and facade improvement expenses such as painting, wall repair or cleaning; window repair or replacement; awnings; new or replacement signage; lighting; streetscape and door repair or replacement. Under the program, the City will loan 50% of the total project cost. Total loan assistance from the City shall not exceed \$20,000.

Total eligible project costs for Tamhara's Secret Corp d/b/a TSecret under the SBFP are \$26,120.41. The Small Business Facade Review Committee recommended approval of funding at an amount not to exceed \$14,000, with the condition that the applicant work with City staff on appearance review and improvements in the right of way. The

project breakdown is as follows: Install new awning, install new landscaping and irrigation, install new window graphics, window replacements and install new metal logo.

13. APPROVED: <u>Lillian Scott-Payne</u> (Submitting Director or authorized Division Mgr **Only**) FIS 3/14/08