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:** Requesting City Council approval of a new employment contract for Office Assistant contract position. This position is located in Permitting Services. 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 \(\subseteq \) 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/PER0002 C. (a) **(b)** (c) 5. **Next Year Annual Continuing** Current **Costs Thereafter Year Estimate** Annualized \$31,304 \$ Personnel \$13,913 Operating Capital Total 13,913 \$31,304 6. If costs do not continue indefinitely, explain nature and expiration date of costs: One year contract expires June 10, 2019. Amount above includes salary at \$12.94/hour and benefits. 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 \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

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 Permitting Services Division is responsible for ensuring development occurs in compliance with life-safety, Building Code and Municipal code standards. Due to improvement in the economy and an increase in construction activity, Permitting is requesting the approval of employment contract for Ms. Holly Loftin for the Office Assistant position. Ms. Loftin will serve as administrative support to the customers and staff.

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

11. What is the Payback period? N/A years