

## **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 annualized costs. Include all related costs necessary to place the asset in service.

**Description:** Establishing a contract with Florida Catastrophe Corp for water damage remediation services at City facilities

## **Expenses**

Will the action be funded from the Department's current year budget?  $\boxtimes$  Yes  $\square$  No

If No, please identify how this action will be funded, including any proposed Budget Resolution Committee (BRC) action(s). (enter text here)

**Estimated Annualized** 

	Cost Estimate	Cost Thereafter
Personnel	\$ <u>0</u>	\$ <u>0</u>
Operating/Capital	\$34,145.00	\$34,145.00
Total Amount	\$34,145.00	\$34,145.00

**Current Fiscal Year** 

Comments (optional): Charges for water damage remediation services will be billed to various cost centers upon rendering the contracted services. VEN 63%, FPR 14% and OPD 23%.)

## Revenues

What is the source of	f any revenue a	and the estimated amount?	(enter text here)	Amount \$0	١
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Is this recurring revenue?  $\square$  Yes  $\square$  No

Comments (optional): (enter text here)

## **Funding**

Expenses/Revenues will be recorded to:

	Source #1	Source #2	Source #3
Fund	5005 F Facilities	(enter text here)	(enter text here)
	Management Fund		
Department /Division	Facilities Management	(enter text here)	(enter text here)
Cost Center/Project/Grant	FAC0001_C Facilities	(enter text here)	(enter text here)
_	Management		
Total Amount	\$34,145.00	\$ <u>0</u>	\$ <u>0</u>