

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: Requesting City Council approval of an employment contract for an Office Assistant contract position. This position is located in Permitting Services.

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).

	Current Fiscal Year Estimated Annualiz Cost Estimate Cost Thereafter	
Personnel	\$44,124.00	\$49,254.00
Operating/Capital	\$ <u>0</u>	\$ <u>0</u>
Total Amount	\$44,124.00	\$49,254.00

Comments (optional): One year employment contract starting on November 10, 2020 and ending on November 9, 2021.

Revenues

What is the source of any revenue and the estimated amount? (enter text here) Amount \$0

Is this recurring revenue? \Box Yes \Box No

Comments (optional): (enter text here)

Funding

Expenses/Revenues will be recorded to:

	Source #1	Source #2	Source #3
Fund	<u>1110_</u> F	(enter text here)	(enter text here)
Department /Division	EDV/Permitting Services	(enter text here)	(enter text here)
Cost Center/Project/Grant	PER0004_C	(enter text here)	(enter text here)
Total Amount	\$44,124.00	\$ <u>0</u>	\$ <u>0</u>