



City of Milwaukee Fiscal Impact Statement

A	Date <u>10/11/2018</u>	File Number <u>181029</u>	<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Substitute
	Subject <u>Lease Agreement with the U.S. Navy for a parcel of 5.9 acres located at 2401 S. Lincoln Memorial Drive</u>			

B	Submitted By (Name/Title/Dept./Ext.) <u>Adam Schlicht/Director/Port Milwaukee/x8130/adam.schlicht@milwaukee.gov</u>
----------	----------------------------------------------------------------------------------------------------------------------------

C	This File	<input type="checkbox"/> Increases or decreases previously authorized expenditures.
		<input type="checkbox"/> Suspends expenditure authority.
		<input type="checkbox"/> Increases or decreases city services.
		<input type="checkbox"/> Authorizes a department to administer a program affecting the city's fiscal liability.
		<input checked="" type="checkbox"/> Increases or decreases revenue.
		<input type="checkbox"/> Requests an amendment to the salary or positions ordinance.
		<input type="checkbox"/> Authorizes borrowing and related debt service.
		<input type="checkbox"/> Authorizes contingent borrowing (authority only).
		<input type="checkbox"/> Authorizes the expenditure of funds not authorized in adopted City Budget.

D	Charge To	<input checked="" type="checkbox"/> Department Account	<input type="checkbox"/> Contingent Fund
		<input type="checkbox"/> Capital Projects Fund	<input type="checkbox"/> Special Purpose Accounts
		<input type="checkbox"/> Debt Service	<input type="checkbox"/> Grant & Aid Accounts
		<input type="checkbox"/> Other (Specify) _____	

E	Purpose	Specify Type/Use	Expenditure	Revenue
	Salaries/Wages		\$0.00	\$0.00
			\$0.00	\$0.00
	Supplies/Materials		\$0.00	\$0.00
			\$0.00	\$0.00
	Equipment		\$0.00	\$0.00
			\$0.00	\$0.00
	Services		\$0.00	\$0.00
			\$0.00	\$0.00
	Other	Lease Revenue	\$0.00	\$105,000.00
			\$0.00	\$0.00
	TOTALS		\$ 0.00	\$105,000.00

F

Assumptions used in arriving at fiscal estimate. \$26,250 paid to the Port quarterly, in arrears. _____

G

For expenditures and revenues which will occur on an annual basis over several years check the appropriate box below and then list each item and dollar amount separately.

- | | | |
|------------------------------------|-----------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> 1-3 Years | <input checked="" type="checkbox"/> 3-5 Years | Option Years One - Four: \$105,000/year in revenue |
| <input type="checkbox"/> 1-3 Years | <input checked="" type="checkbox"/> 3-5 Years | Option Years Five - Ten: \$120,000/year in revenue |
| <input type="checkbox"/> 1-3 Years | <input checked="" type="checkbox"/> 3-5 Years | Option Years Eleven - Fifteen: \$146,400/year in revenue |

H

List any costs not included in Sections D and E above. _____

I

Additional information. Option Years Sixteen - Twenty: \$160,000/year in revenue _____

JThis Note Was requested by committee chair.