



# City of Milwaukee Fiscal Impact Statement

**A** **Date** 1/5/2017 **File Number** 161252  **Original**  **Substitute**  
**Subject** Estimated cost of guaranteed overtime for snow support personnel during an emergency call-out

**B** **Submitted By (Name/Title/Dept./Ext.)** Thomas Bell/Fiscal Planning Specialist - Senior/DOA-Budget/3496

**C** **This File**

- Increases or decreases previously authorized expenditures.
- Suspends expenditure authority.
- Increases or decreases city services.
- Authorizes a department to administer a program affecting the city's fiscal liability.
- Increases or decreases revenue.
- Requests an amendment to the salary or positions ordinance.
- Authorizes borrowing and related debt service.
- Authorizes contingent borrowing (authority only).
- Authorizes the expenditure of funds not authorized in adopted City Budget.

**D** **Charge To**

- Department Account
- Capital Projects Fund
- Debt Service
- Other (Specify) \_\_\_\_\_
- Contingent Fund
- Special Purpose Accounts
- Grant & Aid Accounts

**E**

Purpose	Specify Type/Use	Expenditure	Revenue
Salaries/Wages	\$201,000.00	\$201,000.00	\$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		\$0.00	\$0.00
		\$0.00	\$0.00
<b>TOTALS</b>		<b>\$201,000.00</b>	<b>\$ 0.00</b>

F

Assumptions used in arriving at fiscal estimate. See attached document

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 | <u>These are permanent increases to Snow and Ice Operations</u> |
| <input type="checkbox"/> 1-3 Years | <input type="checkbox"/> 3-5 Years            | _____   |
| <input type="checkbox"/> 1-3 Years | <input type="checkbox"/> 3-5 Years            | _____   |

H

List any costs not included in Sections D and E above. N/A

I

Additional information. N/A

J

This Note  Was requested by committee chair.