



City of Milwaukee Fiscal Impact Statement

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|----------|----------------|---|--------------------|-------|---|--|
| A | Date | 4/10/2018 | File Number | _____ | <input checked="" type="checkbox"/> Original | <input type="checkbox"/> Substitute |
| | Subject | Resolution amending CC Resolution File Number 170382 relating to the WI DNR Principal Forgiven Financial Assistance Agreement for State Fiscal Year 2018 for the replacement of private Lead Service Lines. | | | | |

| | | |
|----------|---|-------|
| B | Submitted By (Name/Title/Dept./Ext.) | _____ |
|----------|---|-------|

| | | |
|----------|------------------|---|
| C | This File | <input checked="" 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 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 checked="" type="checkbox"/> Authorizes the expenditure of funds not authorized in adopted City Budget. |

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

| 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 | Lead Service Line | \$4,250,000.00 | \$0.00 |
| | SDWL Forgiveness | \$0.00 | \$4,250,000.00 |
| TOTALS | | \$4,250,000.00 | \$4,250,000.00 |

F

Assumptions used in arriving at fiscal estimate. _____

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.

 1-3 Years 3-5 Years 1-3 Years 3-5 Years 1-3 Years 3-5 Years**H**

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

I

Additional information. _____

JThis Note Was requested by committee chair.