

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 250099IA02 Requesting Organization: 25009900 LIBRARY CAPITAL P Budget Adjust Type(s): New Capital Project	For Fiscal Year: 2017 Date of Request: 5-Apr-17 One Time Change (Y or N): Y If No, next year's impact: \$0 Net FTE Change: 0.00
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Description and Justification:

Programming for new buildings: The Library plans construction of five buildings. We would like to begin programming and land purchase in 2017 with the identified funds appropriated for land purchase and construction for the Kearns location. The programming and design will include more refined cost estimates for the construction of each of the buildings. With that information we will be able to bond with more accurate project costs in 2018.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	360 LIBRARY FUND
Fund Impact (Budgetary)	\$0
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	\$0

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
TOTALS	0	0	0	0

Approvals

Division Director:

Date: April 5, 2017

Dept. or Elected Fiscal Mgr:

Date: April 7, 2017

Dept. Dir. or Elected Official:

Date: April 11, 2017

Facilities Division Director:
(Capital Projects Only)

Date: April 11, 2017

Chief Financial Officer:

Date: 4/11/17

Mayor or Designee:

Approve

Approve

Date: 4/12/17

Council Action:

Date:

Approve

Budget Adjustment Detail

Budget Year: 2017 * Requesting Department: 25009900 LIBRARY CAPITAL PROJECTS
Budget Period: Pre-June Interim * Req Item No: 250099IA02 * Adjustment Title: Programming for new buildings
Adjustment Type(s): New Capital Project

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
360	020	2500990000	677005		LIB2017PROGBLDG	6,500,000
360	020	2500990000	673005		LIB2018KEARNS	(2,000,000)
360	020	2500990000	677005		LIB2017KEARNS	(4,500,000)

TOTAL EXPENDITURE CHANGE: \$0

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT

TOTAL REVENUE CHANGE: \$0

Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	

TOTAL BALANCE SHEET CHANGE: \$0

* One Time Change (Y or N): Y
If No, next year's impact: _____

No. of New FTEs: 0.00 (2)
No. of New Time Limited FTEs: 0.00 (2)
No. of Transferred FTEs: 0.00 (2)
No. of Other FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and Justification: (Attach additional pages as needed.)*

The Library plans construction of five buildings. We would like to begin programming and land purchase in 2017 with the identified funds appropriated for land purchase and construction for the Kearns location. The programming and design will include more refined cost estimates for the construction of each of the buildings. With that information we will be able to bond with more accurate project costs in 2018.

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 250099IA01	For Fiscal Year: 2017
Requesting Organization: 25009900 LIBRARY CAPITAL P	Date of Request: 11-Apr-17
Budget Adjust Type(s): Existing Capital Project	One Time Change (Y or N): Y
	If No, next year's impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Additional funds for RIV, BCRRTU and TYLRHVAC: Project LIB2017RIV (Riverton Branch Roof-Top Unit): the current budget is \$125K. Per Facility's project cost estimate, attached please find, it needs additional \$66,020 to complete the project.

Project ID LIB2017 BCRRTU (Bingham Creek Branch Roof-Top Unit): the current budget is \$125K. Per Facility's project cost estimate, attached please find, it needs additional \$81,737 to complete the project. The additional funds are to replace the controls and an additional RTU is needed for the three small conference rooms in the building to regulate the air in those rooms.

Project ID LIB2015TYLRHVAC (Tyler Branch HVAC): the current budget is \$550K. This project was scheduled to be completed by the end of 2016 so was not rebudgeted in 2017. Due to delays with the contractor, the project was not completed in 2016, therefore we need to carry the remaining budget \$10,512 to 2017. Additionally, due to some unanticipated problems with the boilers and boiler controls, additional \$28,098 is needed to address the issues, attached please find the cost provided by Facility.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	360 LIBRARY FUND
Fund Impact (Budgetary)	(\$186,367)
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	(\$186,367)

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
2500990000 LIBRARY CAPITAL PROJECTS	0	186,367	0	186,367
PRGM				
TOTALS	0	186,367	0	186,367

Approvals

Division Director: James D. Cooper

Digitally signed by James D. Cooper
Date: 2017.04.11 10:43:48 -06'00'

Date: _____

Dept. or Elected Fiscal Mgr: Yanping Ding

Digitally signed by Yanping Ding
Date: 2017.04.11 13:49:38 -06'00'

Date: _____

Dept. Dir. or Elected Official: Holly Yocom

Digitally signed by Holly Yocom
Date: 2017.04.11 14:17:13 -06'00'

Date: _____

Facilities Division Director: Rory Payne
(Capital Projects Only)

Digitally signed by Rory Payne
Date: 2017.04.11 15:05:51 -06'00'

Date: _____

Chief Financial Officer: 

Approve

Date: 4/11/17

Mayor or Designee: 

Approve

Date: 4/12/17

Council Action: _____

Approve

Date: _____

Budget Adjustment Detail

Budget Year: 2017 *** Requesting Department:** 25009900 LIBRARY CAPITAL PROJECTS
Budget Period: Pre-June Interim *** Req Item No:** 250099A01 *** Adjustment Title:** Additional funds for RIV, BCRRTU and TYLRHVAC
Adjustment Type(s): Existing Capital Project

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
360	020	2500990000	607015		LIB2017RIV	66,020
360	020	2500990000	607015		LIB2017BCRRTU	81,737
360	020	2500990000	607015		LIB2015TYLRHVAC	38,610
TOTAL EXPENDITURE CHANGE:						\$186,367

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
TOTAL REVENUE CHANGE:						\$0

Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	
TOTAL BALANCE SHEET CHANGE:			\$0

* **One Time Change (Y or N):** Y **No. of New FTEs:** 0.00 (2)
If No, next year's impact: \$0 **No. of New Time Limited FTEs:** 0.00 (2)
 No. of Transferred FTEs: 0.00 (2)
 No. of Other FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed.)*

Project LIB2017RIV (Riverton Branch Roof-Top Unit): the current budget is \$125K. Per Facility's project cost estimate, attached please find, it needs additional \$66,020 to complete the project.
 Project ID LIB2017 BCRRTU (Bingham Creek Branch Roof-Top Unit): the current budget is \$125K. Per Facility's project cost estimate, attached please find, it needs additional \$81,737 to complete the project. The additional funds are to replace the controls and an additional RTU is needed for the three small conference rooms in the building to regulate the air in those rooms.
 Project ID LIB2015TYLRHVAC (Tyler Branch HVAC): the current budget is \$550K. This project was scheduled to be completed by the end of 2016 so was not rebudgeted in 2017. Due to delays with the contractor, the project was not completed in 2016, therefore we need to carry the remaining budget \$10,512 to 2017. Additionally, due to some unanticipated problems with the boilers and boiler controls, additional \$28,098 is needed to address the issues, attached please find the cost provided by Facility.

Project Cost Estimate

Riverton Rooftop Replacement and VWT Addition for Comp. Lab

3/3/2017

Owner Project Management	\$	500.00			
Design Services/AE Fee	\$	13,733.05	8.69%	Current project budget	\$125,000
Permits and Fee's	\$	2,000.00		2017 additional funds needed	\$66,020
Owner Facilities Management / Labor	\$	800.00		Revised project budget	\$191,020
HVAC	\$	121,294.00			
Electrical	\$	7,400.00			
Ceilings	\$	3,000.00			
Subtotal	\$	131,694.00			
Bonding by GC	\$	2,633.88	2.00%		
General Conditions by GC	\$	7,901.64	6.00%		
Profit and Overhead by GC	\$	15,803.28	12.00%		
Total Construction	\$	158,032.80			
Construction Contingency	\$	15,803.28	10.00%		
Owner Warranty Inspection	\$	150.00			
Total Project Budget	\$	191,019.13			

Architect and Engineers Design Services:		
Consultant	Fee Breakdown	
Mechanical	\$	10,855
Electrical	\$	1,000
Architectural	\$	500
Structural	\$	-
HHY Coordination	\$	1,375
Total	\$	13,730

Project Cost Estimate
Bingham Creek Library Rooftop Replacement and New Rooftop for Conf Rooms
3/3/2017

Owner Project Management	\$	500.00			
Design Services/AE Fee	\$	14,883.78	8.69%		
Permits and Fee's	\$	2,000.00			
Owner Facilities Management / Labor	\$	800.00			
HVAC	\$	118,779.00			
Electrical	\$	15,400.00			
Structural	\$	5,000.00			
Ceilings and Roofing	\$	3,550.00			
Subtotal	\$	142,729.00			
Bonding by GC	\$	2,854.58	2.00%		
General Conditions by GC	\$	8,563.74	6.00%		
Profit and Overhead by GC	\$	17,127.48	12.00%		
Total Construction	\$	171,274.80			
Construction Contingency	\$	17,127.48	10.00%		
Owner Warranty Inspection	\$	150.00			
Total Project Budget	\$	206,736.06			

Current project budget \$125,000
2017 addition funds needed \$81,737
Revised project budget \$206,737

Architect and Engineers Design Services:		
Consultant	Orig Fee	
Mechanical	\$	7,890
Electrical	\$	1,500
Architectural	\$	2,000
Structural	\$	2,000
HHY Coordination	\$	1,490
Total	\$	14,880

Probable Cost Estimate

Requesting Division: **SLCo Libraries**

Date: **04.10.2017**

Description of Work: Tyler Library HVAC Upgrade

Item No.	Project Phase	Project Budget	
1.00	Design Phase		
1.01	Project Management	\$ 49,482.30	PM Facilities Management
1.02	Design Services / A/E Fee	\$ 55,371.00	Architectural Nexus
1.03	Special Consultant/Testing	\$ 1,794.00	Terracon
1.04	Printing	\$ 10.50	CES&R
2.00	Construction Phase		
2.01	HVAC	\$ 430,542.80	Veritas
2.02	Other	\$ 40,897.83	Stallings
TOTAL PROJECT BUDGET		\$ 578,098.43	

APPROVALS

Prepared by Tyson Kyhl
Facilities Management

Tyson Kyhl
Facilities Management Associate Director

Rory Payne, Director Date
Facilities Management Division

Current project budget	\$550,000
2015 actuals	\$71,878
2016 actuals	\$467,610
2016 remaining (request to be re-budgeted in 2017)	\$10,512
2017 additional funds needed (request)	\$28,098
Revised project budget	\$578,098

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 503700IA02	For Fiscal Year: 2017
Requesting Organization: 50370000 EXCISE TAX ROAD P	Date of Request: 3-Apr-17
Budget Adjust Type(s): New Capital Project	One Time Change (Y or N): Y
	If No, next year's impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Camp Kearns; 8400 W Overpass: This budget adjustment is to temporarily transfer funding from project TB140001, 8400 W Pedestrian Overpass, to project EFCTB170001, Camp Kearns. Funding is needed to establish the Camp Kearns project in order for it to continue to move forward. The Camp Kearns project includes paving roads and installing storm drains, curb, and gutter. The funds are available to transfer from TB140001 because the project will not need the funding until later in 2017. Mayor Finance will prepare a budget adjustment in June to transfer \$1,925,150 from Department 5036000000 to reimburse TB140001 in Department 5037000000.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	426 EXCISE TAX ROAD REV BOND PROJECTS FUND
Fund Impact (Budgetary)	\$0
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	\$0

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
TOTALS	0	0	0	0

Approvals

Division Director: 

Date: 4/3/2017

Dept. or Elected Fiscal Mgr: 

Date: 4-4-17

Dept. Dir. or Elected Official: 

Date: 6 April 2017

Facilities Division Director:
(Capital Projects Only) 

Date: _____

Chief Financial Officer: 

Date: 4-5-17

Mayor or Designee: 

Date: 4/6/17

Council Action: _____

Date: _____

Approve

Budget Adjustment Detail

Budget Year: 2017 *** Requesting Department:** 50370000 EXCISE TAX ROAD PROJECTS UNINCORP
Budget Period: Pre-June Interim *** Req Item No:** 503700IA02 *** Adjustment Title:** Camp Kearns; 8400 W Overpass
Adjustment Type(s): New Capital Project

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
426	050	5037000000	683005		EFCTB170001	1,925,150
426	050	5037000000	683005		TB140001	(1,925,150)

TOTAL EXPENDITURE CHANGE: \$0

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT

TOTAL REVENUE CHANGE: \$0

Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	

TOTAL BALANCE SHEET CHANGE: \$0

*** One Time Change (Y or N):** Y **No. of New FTEs:** 0.00 (2)
If No, next year's impact: **No. of New Time Limited FTEs:** 0.00 (2)
No. of Transferred FTEs: 0.00 (2)
No. of Other FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed.)*

This budget adjustment is to temporarily transfer funding from project TB140001, 8400 W Pedestrian Overpass, to project EFCTB170001, Camp Kearns. Funding is needed to establish the Camp Kearns project in order for it to continue to move forward. The Camp Kearns project includes paving roads and installing storm drains, curb, and gutter. The funds are available to transfer from TB140001 because the project will not need the funding until later in 2017. Mayor Finance will prepare a budget adjustment in June to transfer \$1,925,150 from Department 5036000000 to reimburse TB140001 in Department 5037000000.

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 913000IA01 For Fiscal Year: 2017
 Requesting Organization: 91300000 SHERIFF CW INVEST Date of Request: 4-Apr-17
 Budget Adjust Type(s): FTE/Position Reclass One Time Change (Y or N): N
 FTE Transfers If No, next year's impact: \$4,500
 Net FTE Change: 0.00
 Description and Justification: chng to Sworn

Reclassify Radio Tech to PSO Officer: The Sheriff's Office is requesting to reclassify a currently vacant Radio Tech FTE to a Protective Services Officer FTE. There has been high turnover in this position due to the lack of career opportunities. By reclassifying the job to a sworn position, it will allow for more job opportunities for our officers and for the rotation of staff as needed to ensure the duties of the position are completed. This adjustment is for 8 months of salary and benefits. There is a \$4500 annual difference in salary & benefits that will be absorbed within the current budget.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	110 GENERAL FUND
Fund Impact (Budgetary)	\$0
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	\$0

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
9125001400 PROTECTIVE SVCS DIV - FACILITY	0	45,146	0	45,146
9130000200 SHERIFF ADMIN AND CONTINGENCY-CW	0	(45,146)	0	(45,146)
TOTALS	0	0	0	0

Approvals

Division Director:

Date:

Dept. or Elected Fiscal Mgr:

Date:

Dept. Dir. or Elected Official:

Date:

Facilities Division Director:
(Capital Projects Only)

Date:

Chief Financial Officer:

Date:

Mayor or Designee:

Date:

Council Action:

Date:

Approve

Budget Adjustment Detail

Budget Year: 2017 * Requesting Department: 91300000 SHERIFF CW INVEST/SUPPORT SVCS
 Budget Period: Pre-June Interim * Req Item No: 913000A01 * Adjustment Title: Reclassify Radio Tech to PSO Officer
 Adjustment Type(s): FTE/Position Reclass FTE Transfers

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
110	091	9130000200	601030	FX001		(27,736)
110	091	9130000200	603005	FX001		(2,120)
110	091	9130000200	603025	FX001		(5,120)
110	091	9130000200	603040	FX001		(136)
110	091	9130000200	603050	FX001		(9,554)
110	091	9130000200	605005	FX001		(480)
110	091	9125001400	601035	GY001		27,736
110	091	9125001400	603005	GY001		2,120
110	091	9125001400	603030	GY001		5,120
110	091	9125001400	603040	GY001		136
110	091	9125001400	603050	GY001		9,554
110	091	9125001400	605010	GY001		480
TOTAL EXPENDITURE CHANGE:						\$0

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
TOTAL REVENUE CHANGE:						\$0

Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	
TOTAL BALANCE SHEET CHANGE:			\$0

* One Time Change (Y or N): N
 If No, next year's impact: \$4,500

No. of New FTEs: 0.00 (2)
 No. of New Time Limited FTEs: 0.00 (2)
 No. of Transferred FTEs: 1.00 (2)
 No. of Other FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed.)*

The Sheriff's Office is requesting to reclassify a currently vacant Radio Tech FTE to a Protective Services Officer FTE. There has been high turnover in this position due to the lack of career opportunities. By reclassifying the job to a sworn position, it will allow for more job opportunities for our officers and for the rotation of staff as needed to ensure the duties of the position are completed. This adjustment is for 8 months of salary and benefits. There is a \$4500 annual difference in salary & benefits that will be absorbed within the current budget.

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.

Position Management Information

INSTRUCTIONS: Complete one section for each position. To facilitate efficient execution of HR actions, please complete ALL fields as requested. TO fields are required for all position actions while FROM fields only need to be entered for position transfers. Print pages for completed sections and attach to the budget adjustment form.

Position 1			
Position Number (For changes to existing positions)		00001556	
Existing/Proposed Job Start Date		4/25/2017	
Existing/Proposed Job Code		360 / 765-3	
Existing/Proposed Job Title		Radio Tech / Protective Svcs Officer	
Position Type: Full-Time (FT), Part-Time (PT)		FT	
Time Limited? Yes / No		No	
If Time Limited, expected expiration date		N/A	
Location Code (four digit number)		1218	
Fund	To: 110	From: 110	
PS/BRASS Sub Department Id	To: 9125001400	From: 9130000200	
Reports To Position Number	00001535		
Reports To Job Title	PSO Lieutenant		
FTE (Example: .50 / .75 / 1.0)	To: 1	From: 1	
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))		T	

Position 2			
Position Number (For changes to existing positions)			
Existing/Proposed Job Start Date			
Existing/Proposed Job Code			
Existing/Proposed Job Title			
Position Type: Full-Time (FT), Part-Time (PT)			
Time Limited? Yes / No			
If Time Limited, expected expiration date			
Location Code (four digit number)			
Fund	To:	From:	
PS/BRASS Sub Department Id	To:	From:	
Reports To Position Number			
Reports To Job Title			
FTE (Example: .50 / .75 / 1.0)	To:	From:	
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))			

Position 3			
Position Number (For changes to existing positions)			
Existing/Proposed Job Start Date			
Existing/Proposed Job Code			
Existing/Proposed Job Title			
Position Type: Full-Time (FT), Part-Time (PT)			
Time Limited? Yes / No			
If Time Limited, expected expiration date			
Location Code (four digit number)			
Fund	To:	From:	
PS/BRASS Sub Department Id	To:	From:	
Reports To Position Number			
Reports To Job Title			
FTE (Example: .50 / .75 / 1.0)	To:	From:	
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))			

Total No. of New FTEs:	0	a)
Total No. of New Time Limited FTEs:	0	a)
Total No. of Transferred FTEs:	1	a)
Total No. of Other Actions:	0	a)

(a) Totals will transfer to the "Adj Request" tab's FTE section.

Council Approval section below to be completed only by Council Staff and to be submitted to HR for final processing.

Council Approved:	Yes	No	Date:	Signature:
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CONDENSED POSITION DESCRIPTION QUESTIONNAIRE (CPDQ)

CLASSIFICATION REQUEST

Please complete this form, review with department/division personnel, obtain any necessary approvals as outlined in the Council and HR Requirements Matrix, and forward to your HR consultant. In addition, please include your division's most recent Organization Chart.

This request is for a: Vacant to Existing Position

Department Name: Sheriff's Office

Position Number: 00001556

Division Name: Sheriff's Administration

Division Number: 9130000200

Information Regarding Vacant Existing Allocation

Current Job Title/Grade: Radio/Computer Technician (TRD Grade 12)

Job Code: 360

New Existing Title/Grade: Protective Service Officer

Agency Budget Impact:

☐ 1) There is no budget increase to this year or subsequent year's budgets resulting from this position classification change. Please provide an explanation below:

☒ 2) There is an increase to this year or subsequent year's budgets. Below is a summary of the budget impact:

There is a \$4500 increase to the budgeted salary when comparing the amount budgeted for the Radio Tech position to the average amount budgeted for a Protective Services Officer. The increase amount will be absorbed in the current year budget but will have an impact on next year's budget.

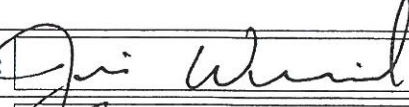
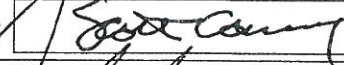

☐ 3) The budget impact for this classification change is unknown at this time.

Business Justification: Please provide a brief summary of the organization need or business justification for this position classification request.

There has been high turnover in this position due to the lack of career opportunities. By reclassifying the job to a sworn position, it will allow for more job opportunities for our officers and for the rotation of staff as needed to ensure the duties of the position are completed.

Department/Division Approval Signatures

By providing approval and electronically signing below, this certifies that processing this classification action does not have a negative impact on the current year's personnel budget. Any budgetary impact has already been addressed and approved by the Council, as needed.

Elected Official or Department Director	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: 
Division Director/ Administrator	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: 
Immediate Supervisor	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: 
Immediate Supervisor's Title: <u>Chief Deputy</u>		
E-Mail: <u>jho491@slco.org</u>		Phone Number: <u>801-884-7024</u>

HR Consultant Contact Information

Consultant	E-Mail	Phone
Debbie Wine	dwine@slco.org	(385) 468-0574
Kirt Davis	ksdavis@slco.org	(385) 468-0588
Martinha Penrod	mpenrod@slco.org	(385) 468-0592
Ryan Speer	rspeer@slco.org	(385) 468-0590
Terry Fortner	tfortner@slco.org	(385) 468-0591

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 410000RE01	For Fiscal Year: 2017
Requesting Organization: 41000000 ANIMAL SERVICES	Date of Request: 27-Mar-17
Budget Adjust Type(s): FTE/Position Reclass	One Time Change (Y or N): N
	If No, next year's impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Reclassify Vacant to Existing Position: Personnel Changes are prorated to begin May 1, 2017. The nature of Animal Services has changed, such as to create the dire need for an employee to directly manage and maintain our community partnerships and increase our community presence.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	735 PUBLIC WORKS FUND
Fund Impact (Budgetary)	\$3,833
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	\$3,833

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
4100000100 ANIMAL SERVICES ADMINISTRATION	0	39,330	0	39,330
4100000600 SPECIAL PROGRAM	0	(43,162)	0	(43,162)
TOTALS	0	(3,833)	0	(3,833)

Approvals

Division Director: 	Date: <u>3/28/17</u>
Dept. or Elected Fiscal Mgr: 	Date: <u>3-29-17</u>
Dept. Dir. or Elected Official: 	Date: <u>29 March 2017</u>
Facilities Division Director: (Capital Projects Only) 	Date: _____
Chief Financial Officer: 	Date: <u>3/31/2017</u>
Mayor or Designee:  Approve	Date: <u>4/5/17</u>
Council Action: _____ Approve	Date: _____

Budget Adjustment Detail

* Requesting Department: 41000000 ANIMAL SERVICES

Budget Period: * Req Item No: * Adjustment Title: Reclassify Vacant to Existing Position

Adjustment Type(s): FTE/Position Reclass

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
735	040	4100000600	601030			(32,890)
735	040	4100000600	603045			(496)
735	040	4100000600	603050			(3,544)
735	040	4100000600	603040			(160)
735	040	4100000600	603045			(6,072)
735	040	4100000100	601030			29,057
735	040	4100000100	603045			496
735	040	4100000100	603050			3,544
735	040	4100000100	603040			160
735	040	4100000100	603045			6,072

TOTAL EXPENDITURE CHANGE:		(3,833)
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Revenue Budget String(s):

[illegible]

TOTAL REVENUE CHANGE:	\$0
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Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments, check if applicable

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	

TOTAL BALANCE SHEET CHANGE:	\$0
-----------------------------	-----

* One Time Change (Y or N): N
If No, next year's impact: \$0

No. of New FTEs:	0.00	(2)
No. of New Time Limited FTEs:	0.00	(2)
No. of Transferred FTEs:	0.00	(2)
No. of Other FTEs:	2.00	(2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed).*

Personnel Changes are prorated to begin May 1, 2017. The nature of Animal Services has changed, such as to create the dire need for an employee to directly manage and maintain our community partnerships and increase our community presence.

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.

Position Management Information

INSTRUCTIONS: Complete one section for each position. To facilitate efficient execution of HR actions, please complete ALL fields as requested. TO fields are required for all position actions while FROM fields only need to be entered for position transfers. Print pages for completed sections and attach to the budget adjustment form.

Position 1			
Position Number (For changes to existing positions)		8087	
Existing/Proposed Job Start Date		5/1/2017	
Existing/Proposed Job Code		485 / 646	
Existing/Proposed Job Title		Special Programs Supervisor Marketing & Communications Coordinator	
Position Type: Full-Time (FT), Part-Time (PT)		FT	
Time Limited? Yes / No		No	
If Time Limited, expected expiration date			
Location Code (four digit number)		1009	
Fund	To: 735	From:	735
PS/BRASS Sub Department Id	To: 4100000600	From:	4100000100
Reports To Position Number	2238		
Reports To Job Title	Associate Director		
FTE (Example: .50 / .75 / 1.0)	To: -1	From:	1
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))		R, RA	

Position 2			
Position Number (For changes to existing positions)			
Existing/Proposed Job Start Date			
Existing/Proposed Job Code			
Existing/Proposed Job Title			
Position Type: Full-Time (FT), Part-Time (PT)			
Time Limited? Yes / No			
If Time Limited, expected expiration date			
Location Code (four digit number)			
Fund	To:	From:	
PS/BRASS Sub Department Id	To:	From:	
Reports To Position Number			
Reports To Job Title			
FTE (Example: .50 / .75 / 1.0)	To:	From:	
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))			

Position 3			
Position Number (For changes to existing positions)			
Existing/Proposed Job Start Date			
Existing/Proposed Job Code			
Existing/Proposed Job Title			
Position Type: Full-Time (FT), Part-Time (PT)			
Time Limited? Yes / No			
If Time Limited, expected expiration date			
Location Code (four digit number)			
Fund	To:	From:	
PS/BRASS Sub Department Id	To:	From:	
Reports To Position Number			
Reports To Job Title			
FTE (Example: .50 / .75 / 1.0)	To:	From:	
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))			

Total No. of New FTEs:	0	a)
Total No. of New Time Limited FTEs:	0	a)
Total No. of Transferred FTEs:	0	a)
Total No. of Other Actions:	0	a)

(a) Totals will transfer to the "Adj Request" tab's FTE section.

Council Approval section below to be completed only by Council Staff and to be submitted to HR for final processing.

Council Approved:	Yes:	No:	Date:	Signature:
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Action Type List:

N New
 TL New Time Limited
 R Reclass
 T Transfer
 A Abolish
 RA Re-allocate
 O Other

Reclass Flag
 0

CONDENSED POSITION DESCRIPTION QUESTIONNAIRE (CPDQ)

CLASSIFICATION REQUEST

Please complete this form, review with department/division personnel, obtain any necessary approvals as outlined in the Council and HR Requirements Matrix, and forward to your HR consultant. In addition, please include your division's most recent Organization Chart.

This request is for a: Vacant to Existing Position

Department Name: Public Works

Position Number: 8087

Division Name: Animal Services

Division Number: 4100

Information Regarding Vacant Existing Allocation

Current Job Title/Grade: Special Programs Supervisor 27

Job Code: 485

New Existing Title/Grade: Marketing & Communications Associate 26

Agency Budget Impact:

- ☒ 1) There is no budget increase to this year or subsequent year's budgets resulting from this position classification change. Please provide an explanation below:

There is expected to be cost savings as a result of this reclassification. In addition, the position is expected to increase the revenue our agency receives.

- ☐ 2) There is an increase to this year or subsequent year's budgets. Below is a summary of the budget impact:



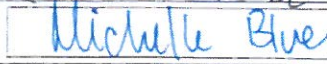
- ☐ 3) The budget impact for this classification change is unknown at this time.

Business Justification: Please provide a brief summary of the organization need or business justification for this position classification request.

The nature of Salt Lake County Animal Services has changed, such as to create the dire need for an employee to directly manage the agency's community partnership efforts. We cannot continue our life-saving work without an increase in city contracts and other partnerships. This position will be directly responsible for maintaining our community partnerships and increasing our community presence.

Department/Division Approval Signatures

By providing approval and electronically signing below, this certifies that processing this classification action does not have a negative impact on the current year's personnel budget. Any budgetary impact has already been addressed and approved by the Council, as needed.

Elected Official or Department Director	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: 
Division Director/ Administrator	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: 
Immediate Supervisor	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: 
Immediate Supervisor's Title: <u>Associate Director</u>		
E-Mail: <u>MBlue@slco.org</u>		Phone Number: <u>385-468-6053</u>

HR Consultant Contact Information

Consultant	E-Mail	Phone
Debbie Wine	dwine@slco.org	(385) 468-0574
Kirt Davis	ksdavis@slco.org	(385) 468-0588
Martinha Penrod	mpenrod@slco.org	(385) 468-0592
Ryan Speer	rspeer@slco.org	(385) 468-0590
Terry Fortner	tfortner@slco.org	(385) 468-0591

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 630000IA01	For Fiscal Year: 2017
Requesting Organization: 63000000 FACILITIES SERVIC	Date of Request: 30-Mar-17
Budget Adjust Type(s): Existing Capital Project	One Time Change (Y or N): Y
	If No, next year's impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Rebudget CGC Reno Public Bathrooms: Rebudget 2016 Government Center Public bathroom Renovation. On Tuesday, December 13, 2016 Council approved the consolidation of several project under expends which added the requested amount to the GC Bathroom Renovation project. The 2016 request failed to include rebudget language. This request to accommodate the rebudget effort.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	450 CAPITAL IMPROVEMENTS FUND
Fund Impact (Budgetary)	(\$273,683)
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	(\$273,683)

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
5050000000 CAPITAL IMPROVEMENTS PRGM	0	273,683	0	273,683
TOTALS	0	273,683	0	273,683

Approvals

Division Director: _____

Date: 3/30/17

Dept. or Elected Fiscal Mgr: _____

Date: 4-12-17

Dept. Dir. or Elected Official: _____

Date: 4-12-17

Facilities Division Director:
(Capital Projects Only) _____

Date: 3/30/17

Chief Financial Officer: _____

Date: _____

Approve

Mayor or Designee: _____

Date: _____

Approve

Council Action: _____

Date: _____

Approve

Budget Adjustment Detail

Budget Year: 2017 * Requesting Department: 63000000 FACILITIES SERVICES
 Budget Period: Pre-June Interim * Req Item No: 630000IA01 * Adjustment Title: Rebudget CGC Reno Public Bathrooms
 Adjustment Type(s): Existing Capital Project

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
450	050	5050000000	607015		095C	273,683

TOTAL EXPENDITURE CHANGE: \$273,683

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT

TOTAL REVENUE CHANGE: \$0

Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	

TOTAL BALANCE SHEET CHANGE: \$0

* One Time Change (Y or N): <u>Y</u> If No, next year's impact: <u> </u>	<table border="0"> <tr> <td>No. of New FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> <tr> <td>No. of New Time Limited FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> <tr> <td>No. of Transferred FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> <tr> <td>No. of Other FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> </table>	No. of New FTEs:	0.00	(2)	No. of New Time Limited FTEs:	0.00	(2)	No. of Transferred FTEs:	0.00	(2)	No. of Other FTEs:	0.00	(2)
No. of New FTEs:	0.00	(2)											
No. of New Time Limited FTEs:	0.00	(2)											
No. of Transferred FTEs:	0.00	(2)											
No. of Other FTEs:	0.00	(2)											

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed.)*

Rebudget 2016 Government Center Public bathroom Renovation. On Tuesday, December 13, 2016 Council approved the consolidation of several project under expends which added the requested amount to the GC Bathroom Renovation project. The 2016 request failed to include rebudget language. This request to accommodate the rebudget effort.

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 630000IA02	For Fiscal Year: 2017
Requesting Organization: 63000000 FACILITIES SERVIC	Date of Request: 30-Mar-17
Budget Adjust Type(s): Existing Capital Project	One Time Change (Y or N): Y
	If No, next year's impact: \$0
	Net FTE Change: 0.00

Description and Justification:

CGC Security Counter Upgrade: County Government Center Security counter upgrade. Since the beginning of this project there have been modest changes to the original scope. These changes include upgraded ballistic panels, HVAC adjustments, signage and simple cabinetry changes. The request is to cover these additional costs.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	450 CAPITAL IMPROVEMENTS FUND
Fund Impact (Budgetary)	\$0
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	\$0

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
TOTALS	0	0	0	0

Approvals

Division Director: _____

Date: 3/30/17

Dept. or Elected Fiscal Mgr: _____

Date: 4-12-17

Dept. Dir. or Elected Official: _____

Date: 4-12-17

Facilities Division Director:
(Capital Projects Only) _____

Date: 3/30/17

Chief Financial Officer: _____

Date: _____

Approve

Mayor or Designee: _____

Date: _____

Approve

Council Action: _____

Date: _____

Approve

Budget Adjustment Detail

Budget Year: 2017 * Requesting Department: 63000000 FACILITIES SERVICES
 Budget Period: Pre-June Interim * Req Item No: 630000IA02 * Adjustment Title: CGC Security Counter Upgrade
 Adjustment Type(s): Existing Capital Project

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
450	050	5050000000	695005		NK010	(20,000)
450	050	5050000000	607015		111C	20,000

TOTAL EXPENDITURE CHANGE: \$0

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT

TOTAL REVENUE CHANGE: \$0

Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	

TOTAL BALANCE SHEET CHANGE: \$0

* One Time Change (Y or N): <u>Y</u> If No, next year's impact: <u> </u>	<table border="0"> <tr> <td>No. of New FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> <tr> <td>No. of New Time Limited FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> <tr> <td>No. of Transferred FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> <tr> <td>No. of Other FTEs:</td> <td style="text-align: right;">0.00</td> <td style="text-align: right;">(2)</td> </tr> </table>	No. of New FTEs:	0.00	(2)	No. of New Time Limited FTEs:	0.00	(2)	No. of Transferred FTEs:	0.00	(2)	No. of Other FTEs:	0.00	(2)
No. of New FTEs:	0.00	(2)											
No. of New Time Limited FTEs:	0.00	(2)											
No. of Transferred FTEs:	0.00	(2)											
No. of Other FTEs:	0.00	(2)											

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed.)*

County Government Center Security counter upgrade. Since the beginning of this project there have been modest changes to the original scope. These changes include upgraded ballistic panels, HVAC adjustments, signage and simple cabinetry changes. The request is to cover these additional costs.

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 6050001A03	For Fiscal Year: 2017
Requesting Organization: 60500000 INFORMATION SVCS	Date of Request: 12-Apr-17
Budget Adjust Type(s): New Request	One Time Change (Y or N): Y
Technical	If No, next year's impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Personnel Study Rebudget Request: In 2016 Council approved a year-end budget adjustment to move \$150,000 of under-expenditures in personnel to operating. The transfer was requested to conduct IS personnel study to meet productivity goals, and to evaluate results of all activities completed regarding skills assessment, alignment of personnel to revised position descriptions, and performance improvement actions/training plans for skill upgrades to match position descriptions or the future organization direction. The funds were encumbered in 2016. However, due to a technical contracting requirement, we are unable to use the previously approved funds to pay for the contract. We are requesting the Council approval to unencumber 2016 funds and reissue the funds in 2017 to pay for the personnel study consulting services.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

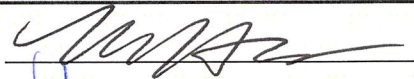
FUND:	110 GENERAL FUND
Fund Impact (Budgetary)	(\$113,724)
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	(\$113,724)

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
6050000110 GENERAL ADMINISTRATION	0	113,724	0	113,724
TOTALS	0	113,724	0	113,724

Approvals

Division Director:



Date: 4-12-17

Dept. or Elected Fiscal Mgr:



Date: 4-12-17

Dept. Dir. or Elected Official:



Date: 4-12-17

Facilities Division Director:
(Capital Projects Only)

Date: _____

Chief Financial Officer:

Date: _____

Approve

Mayor or Designee:

Date: _____

Approve

Council Action:

Date: _____

Approve

Budget Adjustment Detail

Budget Year: 2017 * Requesting Department: 60500000 INFORMATION SVCS
 Budget Period: Pre-June Interim * Req Item No: 6050000A03 * Adjustment Title: Personnel Study Rebudget Request
 Adjustment Type(s): New Request Technical

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
110	060	6050000110	639025			113,724
TOTAL EXPENDITURE CHANGE:						\$113,724

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
TOTAL REVENUE CHANGE:						\$0

Balance Sheet String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT	
		BAL_SHT	
		BAL_SHT	
TOTAL BALANCE SHEET CHANGE:			\$0

* One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)
 If No, next year's impact: \$0 No. of New Time Limited FTEs: 0.00 (2)
 No. of Transferred FTEs: 0.00 (2)
 No. of Other FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed.)*

In 2016 Council approved a year-end budget adjustment to move \$150,000 of under-expenditures in personnel to operating. The transfer was requested to conduct IS personnel study to meet productivity goals, and to evaluate results of all activities completed regarding skills assessment, alignment of personnel to revised position descriptions, and performance improvement actions/training plans for skill upgrades to match position descriptions or the future organization direction. The funds were encumbered in 2016. However, due to a technical contracting requirement, we are unable to use the previously approved funds to pay for the contract. We are requesting the Council approval to unencumber 2016 funds and reissue the funds in 2017 to pay for the personnel study consulting services.

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.