

SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

Executive Summary

Request Item No: 107099IA03 For Fiscal Year: 2019
 Requesting Organization: 10709900 PARKS AND REC CAP Date of Request: 18-Apr-19
 Budget Adjust Type(s): Existing Capital Project Ongoing (Y or N): N
 New Capital Project If Yes, next year's CF impact: \$0
 Net FTE Change: 0.00

Description and Justification:

Regional Trail Projects: For 2019, the Council approved a \$1,000,000 project for trail and related infrastructure to be determined. Parks & Recreation requests this adjustment to reflect the current proposal to allocate the project funds: Utah & Salt Lake Canal Trail (\$600,000), Rose Fork & Yellow Canyon Trails (\$280,000), Big Cottonwood Canyon Cardiff By-Pass Trail (\$100,000), and Bonneville Shoreline Trail (\$20,000). No new county funding is requested.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	181 TRCC TOURISM REC CULTRL CONVEN 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: 4/18/19

Dept. or Elected Fiscal Mgr:

Date: 4.18.19

Dept. Dir. or Elected Official:

Date: 4.18.19

Facilities Division Director:
(Capital Projects Only)

Date: 4/18/19

Chief Financial Officer:

Date: 4/18/19

Mayor or Designee:

Date: 4/23/19

Council Action:

Date:

Approve

Budget Adjustment Detail	
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Budget Year: 2019

* Requesting Department: 10709900 PARKS AND REC CAPITAL IMPROVEMENT

Budget Period: Pre-June Interim

* Req Item No: 107099A03

* Adjustment Title: Regional Trail Projects

Adjustment Type(s): Existing Capital Project

New Capital Project

Downloaded from <http://ajph.org/> on November 10, 2015

Expense Budget String(s):

FUND	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
181	1070990000	673020		PART19RGTR	(1,000,000)
181	1070990000	673020		PART18UCTR01	600,000
181	1070990000	673020		PART18YFPK01	280,000
181	1070990000	664005		NFST19BCCY01	100,000
181	1070990000	664005		NFST19BSTR01	20,000

TOTAL EXPENDITURES Page 1:	\$0
TOTAL EXPENDITURES ALL PAGES:	\$0

Revenue Budget String(s):

[illegible]

TOTAL REVENUES Page 1:	\$0
TOTAL REVENUES ALL PAGES:	\$0

Balance Sheet/Fund Unrestriction String(s):

☐ Bal sheet strings only required for Proprietary Fund adjustments or fund unrestrictions; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT or 499999	
		BAL_SHT or 499999	
		BAL_SHT or 499999	

TOTAL BALANCE SHEET CHANGE:	\$0
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* Ongoing (Y or N):	N
If Yes, next year's CF 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 Abolished 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.)*

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(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.