

SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

Executive Summary

Request Item No: 505000IA01	For Fiscal Year: 2020
Requesting Organization: 50500000 CAPITAL IMPROVEME	Date of Request: 22-Apr-20
Budget Adjust Type(s): New Capital Project	Ongoing (Y or N): N
	If Yes, next year's CF impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Kearns Aging study & Design for Mech. Units: To conduct a feasibility study and design on mechanical units at the Kearns Senior Center. There were two units that previously caught on fire and are no longer functioning. This is an urgent request as both units are critical and service the public areas of the building. One unit services the Kitchen and is need in order for the kitchen to function. The other unit services the exercise room, public restrooms, thrift store, lobby and surrounding areas. These two units are critical to the complete operation of the building.

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: _____
Dept. or Elected Fiscal Mgr:	_____	Date: _____
Dept. Dir. or Elected Official:	_____	Date: _____
Facilities Division Director: <i>(Capital Projects Only)</i>	_____	Date: _____
Chief Financial Officer:	_____	Date: _____
	Approve	
Mayor or Designee:	_____	Date: _____
	Approve	
Council Action:	_____	Date: _____
	Approve	

Budget Adjustment Detail

Budget Year: 2020 * Requesting Department: 50500000 CAPITAL IMPROVEMENTS

Budget Period: Pre-June Interim * Req Item No: 505001A04 * Adjustment Title: Kearns Aging study & Design for Mech. Units

Adjustment Type(s): New Capital Project

Expense Budget String(s):

FUND	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
450	5050000000	639025		AGE201910THARP	(23,212)
450	5050000000	607015		AGE2019RVASTONE	(21,038)
450	5050000000	639025		AGE003	44,250

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

Revenue Budget String(s):

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

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

* Ongoing (Y or N): N No. of New FTEs: 0.00 (2)
If Yes, next year's CF impact: \$0 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.)*

To conduct a feasibility study and design on mechanical units at the Kearns Senior Center. There were two units that previously caught on fire and are no longer functioning. This is an urgent request as both units are critical and service the public areas of the building. One unit services the Kitchen and is need in order for the kitchen to function. The other unit services the exercise room, public restrooms, thrift store, lobby and surrounding areas. These two units are critical to the complete operation of the building.

(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.