

Louisville Metro Council City Agency Request

- Neighborhood Development Fund (NDF)
- Capital Infrastructure Fund (CIF)
- Municipal Aid Program (MAP)

Primary Sponsor: Councilwoman Hamilton

Amount: \$3,648⁰⁰ **Date:** 6-18-84

Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):

Tree Removal in easement for public safety

321 Shaunee Terrace
325 Shaunee Ter.
300 Shaunee Ter.
311 No. 44th St.

City Agency: Mark White
Contact Person: Public Works Arborist
Agency Phone: 574-2565

I have reviewed this request for an expenditure of city tax dollars, and have determined the funds will be used for a public purpose.

5 District # Cheri B. Hamilton Council Member Signature \$3,648⁰⁰ Amount 6/18/14 Date

Approved by: _____
Appropriations Committee Chairman Date

Clerk's Office & OMB Use Only:

Request Amount: _____ Amended Amount: _____
 Reference #: _____ To OMB: _____
 Budget Revision #: _____
 Account #: _____
 To Project Manager: _____ Completion Date: _____
 Actual Cost: _____ Funds Returned: _____

OFFICE OF METRO COUNCIL CLERK

REVIEWED

DATE 7-1-14 TIME 11:39am

Hamilton, Cheri

From: White, Mark A
Sent: Wednesday, June 18, 2014 3:49 PM
To: Friend-Ellis, Myra
Cc: Hamilton, Cheri; McGinnis, Tiffany
Subject: Tree removals 6-17-14

These trees in district 5 are in decline/dead and needs to be removed. Let me know when funds will be appropriated and I will get a P/O # for removal.

1. 321 Shawnee Ter. 22" Maple \$768.00
 2. 325 Shawnee Ter. 26" Maple 864.00
 3. 300 Shawnee Ter. 32" Ash 1,248.00
 4. 311 No. 44th St Removal of hanging and lower branches. \$768.00
- Total.....\$3648.00

Mark A. White
Public Works and Assets
Landscaping / Arborist Dept.
Office: 502-574-2565
Mobile: 502 664-2593
mark.white@louisvilleky.gov

NDF OR CIF INTERAGENCY CHECKLIST

Interagency Name: *Public Works & Assets*

Program/Project Name: *Tree Removal in District 5*

Yes/No/NA

Request Form: Is the NDF Request Signed by all Council Member(s) Appropriating Funding?

Yes

Request Form: If matching funds are to be used, are they disclosed with account numbers in the request form description?

NA

Request Form: If matching funds are to be used, does the amount of the request exclude the matching fund amount?

NA

Request Form: If other funds are to be used for this project, are they disclosed with account numbers in the request form description?

NA

Funding Source: If CIF is being requested, does Metro Louisville own/will own the real estate, building or equipment? If not, the funding source is probably NDF.

NA

Funding Source: If CIF is being requested, does the project have a useful life of more than one year? If not, the funding source is probably NDF.

NA

Ordinance Required: Is the NDF request to a Metro Agency greater than \$5,000?

NO

Ordinance Required: Is the request a transfer from NDF to cost center? If so, is the amount given for the fiscal year \$25,000 or less?

NA

Prepared by: *Cheri B. Hamilton*

Date: *6-23-14*