

**Louisville Metro Council City Agency Request**  
**Neighborhood Development Fund (NDF)**  
**■ Capital Infrastructure Fund (CIF)**  
**Municipal Aid Program (MAP)**  
**Paving Fund (PAV)**

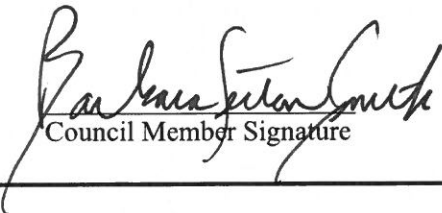
**Primary Sponsor:** Barbara Sexton Smith

**Amount:** \$598.00 **Date:** 03-23-2018

**Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):**  
Russell Neighborhood decorative trash receptacle to bel placed at the corner of 18th and Muhammad Ali next to Sweet Peaches restaurant.

**City Agency:** Solid Waste Management  
**Contact Person:** Steve Fenster  
**Agency Phone:** 574-8116

**I have reviewed this request for an expenditure of city tax dollars, and have determined the funds will be used for a public purpose and have the attached documentation from the receiving department concerning the project/expenditure.**

4   \$598.00 3-23-18  
District # Council Member Signature Amount 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: \_\_\_\_\_

## NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST

**Interagency Name:** Solid Waste Managment

**Program/Project Name:** Russell Neighborhood Decorative Trash Receptacle

	Yes/No/NA	
<b>Request Form:</b> Is the Request Signed by all Council Member(s) Appropriating Funding?	Yes	<input type="checkbox"/>
<b>Request Form:</b> If matching funds are to be used, are they disclosed with account numbers in the request form description?	NA	<input type="checkbox"/>
<b>Request Form:</b> If matching funds are to be used, does the amount of the request exclude the matching fund amount?	NA	<input type="checkbox"/>
<b>Request Form:</b> If other funds are to be used for this project, are they disclosed with account numbers in the request form description?	NA	<input type="checkbox"/>
<b>Funding Source:</b> 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.	Yes	<input type="checkbox"/>
<b>Funding Source:</b> 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.	Yes	<input type="checkbox"/>
<b>Ordinance Required:</b> Is the NDF request to a Metro Agency greater than \$5,000? If so, an ordinance is required.	NA	<input type="checkbox"/>
<b>Ordinance Required:</b> 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	<input type="checkbox"/>
<b>Supporting Documentation:</b> Does the attachment include a valid estimate and description of cost?	Yes	<input type="checkbox"/>

**Submitted by:** \_\_\_\_\_ Christa Robinson \_\_\_\_\_

**Date:** 3-23-18

## Robinson, Christa

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**From:** Sullivan, Kimberly L  
**Sent:** Friday, March 23, 2018 1:40 PM  
**To:** Robinson, Christa  
**Cc:** Booker, Richmond; Fenster, Steve A  
**Subject:** RE: Decorative Trash receptacle for the corner of 18th and Muhammad Ali next to Sweet Peaches

\$598.00

*Kimberly Sullivan*

Administrative Supervisor II  
Louisville Metro Public Works  
Solid Waste Management (SWMS)  
600 Meriwether Avenue  
Louisville, KY 40217  
Office: (502) 574-2781  
Cell: (502) 216-0426  
Fax: (502) 574-4155  
Website: [www.louisvilleky.gov](http://www.louisvilleky.gov)

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**From:** Robinson, Christa  
**Sent:** Friday, March 23, 2018 1:39 PM  
**To:** Sullivan, Kimberly L  
**Cc:** Booker, Richmond  
**Subject:** Decorative Trash receptacle for the corner of 18th and Muhammad Ali next to Sweet Peaches

Hi,  
Could you tell me what the cost would be for the one decorative trash receptacle to be placed at the corner of 18<sup>th</sup> and Muhammad Ali next to Sweet Peaches restaurant?

Thank you!

**Christa Robinson**

Legislative Assistant  
Metro Council District Four  
Councilwoman Barbara Sexton Smith  
601 West Jefferson Street  
Louisville, Kentucky 40202  
Email: [Christa.robinson@louisvilleky.gov](mailto:Christa.robinson@louisvilleky.gov)  
Office: (502)574-1104

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