

# Louisville Metro Council City Agency Request

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

**Primary Sponsor:** BRENT T. ACKERSON

**Amount:** \$10,600.00 **Date:** 09/04/2015

**Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):**  
 Hikes Point Subdivision (Plat Book 12, Page 76) Sidewalk Connection Project will connect sidewalks at corners to the street. Phase One is Bryan Way and Dogwood Drive, Deibel Way and Dogwood Drive, Deibel Way and Ross Boulevard, and Deibel Way and Bryan Way.

**City Agency:** Public Works  
**Contact Person:** Mache Readus-Wright  
**Agency Phone:** 502-574-3884

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

<u>26</u>		<u>\$10,600.00</u>	<u>09/04/2015</u>
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: \_\_\_\_\_

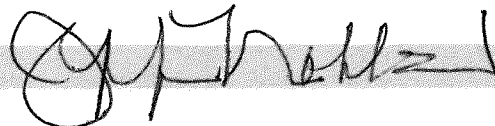
## CIF, NDF, MAP OR PAV INTERAGENCY CHECKLIST

**Interagency Name:** Public Works

**Program/Project Name:** Hikes Point Subdivision (Plat Book 12, Page 76) Sidewalk Connection Project

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

**Prepared by:**



**Date:** 09/04/2015