Louisville Metro Council City Agency Request

		Neighborhood Dev Capital Infrastruc	velopment Fund (NDF)	
		Municipal Aid Pro	, ,	
	_	Paving Fund (PAV	- ' '	
Primary Spons	or: Bill Hollander			
Amount: \$528.0	J0	Γ)ate: March 8, 2016	
Description of	program/project ji	naludina nublic nu	rpose, additional funding	g courses location of
project/program	m and any external	al grantee(s):		
	ay 14 from 9:30		Annual Responsible o.m. Crew will collect	e Recycling event on tritems for SWMS
City Agency:	SWMS			
Contact Person	n: Steve Fenster			
Agency Phone:	: 574-8116			
will be used for	d this request for an	n expenditure of ci	ity tax dollars, and have	
9	RM Ma	ka gu	\$528.00	03/08/16
District #	Council Member	r Signature	Amount	Date
Approved by:	:			
TOPE		Committee Chairn	nan	Date
Clerk's Office	e & OMB Use On	ıly:		
Request Amou	unt:		Amended Amount: _	
Reference #: _			To OMB:	
	at and the second			
To Project Manager:				
Actual Cost:			Funds Returned:	

CIF, NDF, MAP OR PAV INTERAGENCY CHECKLIST Interagency Name: SWMS Program/Project Name: Overtime and truck at Responsible Recycling Event Yes/No/NA Request Form: Is the Request Signed by all Council Member(s) Yes Appropriating Funding? **Request Form:** If matching funds are to be used, are they disclosed with NA account numbers in the request form description? Request Form: If matching funds are to be used, does the amount of the NA request exclude the matching fund amount? **Request Form:** If other funds are to be used for this project, are they NA disclosed with account numbers in the request form description? 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 NA probably NDF. Funding Source: If CIF is being requested, does the project have a useful NA life of more than one year? If not, the funding source is probably NDF. **Ordinance Required:** Is the NDF request to a Metro Agency greater than No \$5,000? If so, an ordinance is required. Ordinance Required: Is the request a transfer from NDF to cost center? If No so, is the amount given for the fiscal year \$25,000 or less? **Supporting Documentation:** Does the attachment include a valid estimate Yes and description of cost?

Prepared by:

Well Etton dy

Date: March 8, 2016

Ethridge, Kyle

From:

Fenster, Steve A

Sent:

Friday, February 26, 2016 9:10 AM

To:

Flood, Pete C.; Baldon, Antonio J Sr

Cc:

Ethridge, Kyle; Hackett, Keith

Subject:

RE: Responsible Recycling Overtime

Attachments:

5HrCost Estimate.xlsx

Follow Up Flag:

Flag for follow up

Flag Status:

Flagged

Here it is:

From: Flood, Pete C.

Sent: Friday, February 26, 2016 8:41 AM **To:** Fenster, Steve A; Baldon, Antonio J Sr

Cc: Ethridge, Kyle; Hackett, Keith

Subject: RE: Responsible Recycling Overtime

Steve, Antonio,

Who can give Kyle a cost for overtime to operate at this event? After discussions with Keith it was determined we would need two employees and the stake bed truck to staff and then transport materials collected to the HazBin. The time would be 5 hours on a Saturday.

Thanks

From: Ethridge, Kyle

Sent: Wednesday, February 17, 2016 1:18 PM

To: Flood, Pete C.; Hackett, Keith

Subject: Responsible Recycling Overtime

Hi Keith and Pete.

Just wanted to check in with you regarding the cost for overtime staff at the Responsible Recycling event.

Thank you! Kyle



Ms. Kyle Ethridge | Legislative Assistant Office of Councilman Bill Hollander 601 W. Jefferson Street | Louisville, KY 40202 d: (502) 574-3908 o: (502) 574-1109

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Cost Estimate Form

Description of Service: Equipment and manpower

2/26/2016

Equipment/Employees	Cost	Per Unit	Total
State Bed Truck	\$60.00	5 hours	\$300
Packer Labor	\$22.82	5 hours	\$114
Packer Labor	\$22.82	5 hours	\$114
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			-

	Total	\$528.00

Description of Service: Collect and Haul Junk and Debris/Park Area

Date: 11/01/2014

Weight Collected	Rate for Disposal/Ton	Per Unit	Total
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AL SIGN			

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