## **Louisville Metro Council City Agency Request**

	Neighborhood Dev Capital Infrastruct Municipal Aid Pro Paving Fund (PAV	gram (MAP)	
Primary Sponsor: Bill Hollander			
Amount: \$5,000	_ D:	ate: July 29, 2016	
Description of program/project in project/program and any extern Grant to Metro Parks for S project.	al grantee(s):		
City Agency: Metro Parks  Contact Person: Erika Nelson  Agency Phone: 574-6356			
I have reviewed this request for will be used for a public purpose 9  District # Council Memb	Alod	ty tax dollars, and have on \$5,000 Amount	determined the funds $\frac{07/29/16}{\text{Date}}$
Approved by: Appropriations	s Committee Chairm	nan	Date
Clerk's Office & OMB Use O	only:		
Request Amount:			
Reference #:			
Budget Revision #:			
Account #:			
To Project Manager:			
Actual Cost:		Funds Returned:	

## Ethridge, Kyle

From:

Nelson, Erika L

Sent:

Friday, July 29, 2016 11:46 AM

To:

Ethridge, Kyle

Cc:

Hamilton, John P; Veeneman, Andrea R.

Subject:

RE: CIF for Metro Parks - Story Avenue Park

Selforde

Hello Kyle -

Yes, Parks will accept \$5,000 from D-9 for the Story Avenue Park project.

Best,

## Erika Nelson

Community Relations Administrator | Louisville Metro Parks & Recreation

Office: 502-574-6356 Cell: 502-445-3024

Erika.nelson@louisvilleky.gov





From: Ethridge, Kyle

Sent: Friday, July 29, 2016 11:19 AM

To: Nelson, Erika L

Cc: Hamilton, John P; Veeneman, Andrea R.

**Subject:** CIF for Metro Parks - Story Avenue Park

Erika,

Will Metro Parks accept \$5,000 from District 9 CIF funds for the Story Avenue Park project?

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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CIF, NDF, MAP OR PAV INTERAGENCY CHECKLIST				
Interagency Name: Metro Parks				
Program/Project Name: Story Avenue Park Improvements				
	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			
Ordinance Required: Is the NDF request to a Metro Agency greater than \$5,000? If so, an ordinance is required.	No			
<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?	No			
<b>Supporting Documentation:</b> Does the attachment include a valid estimate and description of cost?	No			

Prepared by:

**Date:** July 29, 2016