Louisville Metro Council City Agency Request

Neighborhood Development Fund (NDF)

Capital Infrastructure Fund (CIF)
 Municipal Aid Program (MAP)
 Paving Fund (PAV)

Primary Sponsor: Mariann	e Butler		
Amount: \$12,500		Date: 9-1-17	
Description of program/pr location of project/program Installation of a water fountain, a Park near hill runners Kiosk.	n and any exteri	ial grantee(s):	_
City Agency: Metro Parks ar	nd Recreation		
Contact Person: Marty Store	h		
Agency Phone: 502-574-611	2		
I have reviewed this reques determined the funds will be documentation from the re	e used for a pub	olic purpose and have	the attached
15 District # Council Memb	er Signature	7,500 - Amount	8-31-17 Date
Approved by:			
Appropriations Clerk's Office & OMB Use O	Committee Chairr	nan	Date
Request Amount:		Amended Amount:	
Reference #:	·	To OMB:	
Budget Revision #:			
Account #:			
To Project Manager:		Completion Date:	
Actual Cost:		Funds Returned:	

Department/Project:

Water fountain, refill station and dog bowl style fountain to be placed at Iroquois Park

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

Council Member Signature and Amount

District 1	\$
District 2	
District 3	\$
District 4	\$
District 5	\$
District 6	\$
District 7	\$ ·
District 8	<u> </u>
District 9	\$
District 10	\$\$
District 11	\$
District 12	\$
District 13	\$
District 14	<u> </u>
District 15	<u> </u>
District 16	\$
District 17	\$
District 18	<u> </u>
District 19	\$
District 20	\$
District 21	\$ _
751 1 1 1 2 2	\$
District 23	\$
District 24	\$
District 25	\$
District 26	\$

NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST

Interagency Name: Parks and Recreation

Program/Project Name: water fountain, refill station and dog bowl style fountain to be placed at Iroque

	Yes/No/NA
Request Form: Is the 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.	Yes
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.	Yes
Ordinance Required: Is the NDF request to a Metro Agency greater than \$5,000? If so, an ordinance is required.	NA
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?	No
Supporting Documentation: Does the attachment include a valid estimate and description of cost?	Yes

Submitted by: shughes	Date:	Sep 1, 2017
-----------------------	-------	-------------

Hughes, Susan

From:

Butler, Marianne

Sent:

Thursday, August 31, 2017 1:25 PM

To:

Storch, Marty; Hughes, Susan

Cc:

Canuel, Jason T; Parker, Kenneth R; Hallett, Michael A

Subject: Re: Water FOuntain

Thanks - we will start the money movement.

Marianne

From: Storch, Marty

Sent: Thursday, August 31, 2017 11:51:06 AM

To: Butler, Marianne; Hughes, Susan

Cc: Canuel, Jason T; Parker, Kenneth R; Hallett, Michael A

Subject: Water FOuntain

CW Butler we will gladly accept \$12,500 needed funding for water fountain, refill station and dog bowl style fountain to be placed at Iroquois Park near hill runners kiosk. This will be a huge community benefit for walkers, bikers, joggers, disc golf and IA guest. If you would like we will start paperwork process and line up schedule for installation.