Louisville Metro Council City Agency Request

Neighborhood Development Fund (NDF)

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

Amount: \$376	Date: 10-9-2017	,
Description of program/project included location of project/program and any education of project included by the project i	external grantee(s):	
City Agency: Public Works		
Contact Person: Bonnie Roades		
Agency Phone: 502. 574-3091		
determined the funds will be used for	a public purpose and nave	
documentation from the receiving dep		
documentation from the receiving dep 4	partment concerning the pr	oject/expenditure.
4 - Parleus led	\$376 Amount	oject/expenditure.
Approved by: Appropriations Committee	\$376 Amount Chairman	10-6-2017 Date
Approved by: Appropriations Committee Clerk's Office & OMB Use Only:	\$376 Amount Chairman	10-6-2017 Date
Approved by: Appropriations Committee Clerk's Office & OMB Use Only: Request Amount:	\$376 Amount Chairman Amended Amount: To OMB:	10-6-2017 Date Date
Approved by: Appropriations Committee Clerk's Office & OMB Use Only: Request Amount: Reference #:	\$376 Amount Chairman Amended Amount: To OMB:	10-6-2017 Date Date
Approved by: Appropriations Committee Clerk's Office & OMB Use Only: Request Amount: Reference #: Budget Revision #:	\$376 Amount Chairman Amended Amount: To OMB:	10-6-2017 Date Date

NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST Interagency Name: Public Works Program/Project Name: Dr. F. Bruce Williams Way 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 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 Yes funding source is probably NDF. 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? NA Supporting Documentation: Does the attachment include a valid estimate and description of cost?

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Submitted by: Manager All All All All All All All All All Al	Kel	Date:

Robinson, Christa

From:

Hines, William A

Sent:

Friday, October 6, 2017 1:54 PM

To:

Robinson, Christa Roades, Bonnie J

Cc: Subject:

RE: Charlie Johnson Way

Christa,

My apologies for the miscommunication, I could have provided you the cost estimate. I was under the impression you needed billing information.

The cost for (1) honorary street name sign is \$188, so total for (2) will be \$376.

Thank you,

William A. Hincs III Labor Supervisor Louisville Metro Public Works Signs & Markings Division 1450 Lexington Rd Louisville, KY 40206 (502) 794-6862



From: Roades, Bonnie J

Sent: Friday, October 06, 2017 12:55 PM

To: Robinson, Christa **Cc:** Hines, William A

Subject: FW: Charlie Johnson Way

HI, Christa

I will be forwarding your request to the supervisor over fabrication, William Hines. He will be able to help you with your request.

Bill -

Please see Christa's request.

thanks

From: Robinson, Christa

Sent: Friday, October 06, 2017 12:31 PM

To: Roades, Bonnie J

Subject: Charlie Johnson Way

Hi Bonnie,

I am requesting an estimate for an honorary street sign for Dr. Charlie Johnson at 16th and Maple.

Please advise.

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

Office: (502)574-1104

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