

**SANTA FE COUNTY**  
**RESOLUTION 1999- 143**

**A RESOLUTION REQUESTING AUTHORIZATION TO MAKE THE BUDGET ADJUSTMENT DETAILED ON THIS FORM**

Whereas, the Board of County Commissioners meeting in regular session on November 30, 1999, did request the following budget adjustment:

Department / Division: Fire Department / Fire Districts Fund Name: Fire Districts (209)

Budget Adjustment Type: Increase Fiscal Year: 2000 ( July 1, 1999-June 30, 2000)

BUDGETED REVENUES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0831	385	02-00	Budgeted Cash / State Funds	7,972	
209	0832	385	02-00	Budgeted Cash / State Funds	48,186	
209	0833	385	02-00	Budgeted Cash / State Funds	21,845	
<b>TOTAL (if SUBTOTAL, check here <u>X</u>)</b>					78,003	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	CATEGORY / LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0831	422	40-04	Maintenance / Vehicle	2,287	
209	0831	422	60-08	Supplies / Field Supplies	2,290	
209	0831	422	70-03	Other Operating Costs / Telephone	2,000	
209	0831	422	80-03	Capital Purchases/ Equipment & Machinery	1,395	
<b>TOTAL (if SUBTOTAL, check here <u>X</u>)</b>					7,972	

Requesting Department Approval: *Stan Holder* Title: Chief, Santa Fe County Fire Department Date: 11/23/99

Finance Department Approval: *Katherine Miller* Date: 11/24/99 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: *[Signature]* Date: 11-30-99

1712680

# SANTA FE COUNTY

## RESOLUTION 1999 - 143

### BUDGET ADJUSTMENT CONTINUATION SHEET

BUDGETED REVENUES: (use continuation sheet, if necessary)

1712681

FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX / XXXX	COST CENTER CODE XXXXXX	REVENUE CODE XXXXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0834	385	02-00	Budgeted Cash / State Funds	10,003	
209	0834	385	04-00	Budgeted Cash / Special Assessments	7,172	
209	0835	385	02-00	Budgeted Cash / State Funds	7,052	
209	0836	385	02-00	Budgeted Cash / State Funds	12,336	
209	0837	385	02-00	Budgeted Cash / State Funds	5,790	
209	0838	385	02-00	Budgeted Cash / State Funds	14,104	
<b>TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/> )</b>					<b>134,460</b>	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX-XXX	COST CENTER CODE XXXXXX	CATEGORY / LINE ITEM CODE XXX / XXXXX	CATEGORY / LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0832	422	80-03	Capital Purchases / Equipment & Machinery	48,186	
209	0833	422	40-01	Maintenance / Building & Structures	11,845	
209	0833	422	60-02	Supplies / Safety Equipment	10,000	
209	0834	422	40-06	Maintenance / Equipment	10,003	
209	0834	422	80-03	Capital Purchases / Equipment & Machinery	7,172	
209	0835	422	60-02	Supplies/ Safety Equipment	7,052	
209	0836	422	80-01	Capital Purchases / Building & Structures	37,626	
209	0837	422	80-01	Capital Purchases / Building & Structures	5,790	
209	0838	422	60-02	Supplies / Safety Equipment	14,104	
209	0839	422	30-05	Travel / Gas & Oil	1,500	
209	0839	422	40-04	Maintenance / Vehicle	5,500	
209	0839	422	60-02	Supplies / Safety Equipment	8,000	
209	0839	422	70-04	Other Operating Costs / Electricity	3,000	
209	0839	422	80-01	Capital Purchases / Building & Structures	63,475	
209	0840	422	30-05	Travel / Gas & Oil	1,000	
<b>TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/> )</b>					<b>242,225</b>	

# SANTA FE COUNTY

## RESOLUTION 1999 - 143

### BUDGET ADJUSTMENT CONTINUATION SHEET

BUDGETED REVENUES: (use continuation sheet, if necessary)

1712682

FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX / XXXX	COST CENTER CODE XXXXXX	REVENUE CODE XXXXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0839	385	02-00	Budgeted Cash / State Funds	31,475	
209	0839	385	04-00	Budgeted Cash / Special Assessments	50,000	
209	0840	385	02-00	Budgeted Cash / State Funds	11,313	
209	0840	385	04-00	Budgeted Cash / Special Assessments	53,578	
209	0841	385	02-00	Budgeted Cash / State Funds	8,366	
209	0842	385	02-00	Budgeted Cash / State Funds	9,704	
<b>TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/> )</b>					<b>298,896</b>	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX-XXX	COST CENTER CODE XXXXXX	CATEGORY / LINE ITEM CODE XXX / XXXXX	CATEGORY / LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0840	422	40-04	Maintenance / Vehicle	4,000	
209	0840	422	60-07	Supplies / Office Supplies	2,000	
209	0840	422	70-03	Other Operating Costs / Telephone	2,313	
209	0840	422	80-03	Capital Purchases / Equipment & Machinery	55,578	
209	0841	422	80-03	Capital Purchases / Equipment & Machinery	8,366	
209	0842	422	60-08	Supplies / Field Supplies	4,852	
209	0842	422	80-03	Capital Purchases / Equipment & Machinery	4,852	
209	0843	422	60-02	Supplies / Safety Equipment	5,377	
209	0843	422	70-04	Other Operating Costs / Electricity	1,300	
209	0843	422	80-03	Capital Purchases / Equipment & Machinery	29,950	
209	0843	422	80-04	Capital Purchases / Furniture & Fixtures	5,000	
209	0844	422	80-03	Capital Purchases / Equipment & Machinery	14,757	
209	0845	422	80-09	Capital Purchases / Vehicle	5,067	
<b>TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/> )</b>					<b>385,637</b>	

# SANTA FE COUNTY

## RESOLUTION 1999 - 143

### BUDGET ADJUSTMENT CONTINUATION SHEET

BUDGETED REVENUES: (use continuation sheet, if necessary)

1712683

FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX / XXXX	COST CENTER CODE XXXXXX	REVENUE CODE XXXXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0843	385	02-00	Budgeted Cash / State Funds	10,377	
209	0843	385	04-00	Budgeted Cash / Special Assessment	29,950	
209	0843	385	06-00	Budgeted Cash / Misc. Revenue	1,300	
209	0844	385	02-00	Budgeted Cash / State Funds	14,757	
209	0845	385	02-00	Budgeted Cash / State Funds	5,067	
<b>TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/> )</b>					360,347	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX-XXX	COST CENTER CODE XXXXXX	CATEGORY / LINE ITEM CODE XXX / XXXXX	CATEGORY / LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
<b>TOTAL (if SUBTOTAL, check here <input type="checkbox"/> )</b>						

**SANTA FE COUNTY**

**RESOLUTION 1999 - 143**

**BUDGET ADJUSTMENT CONTINUATION SHEET**

BUDGETED REVENUES: (use continuation sheet, if necessary)

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FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX / XXXX	COST CENTER CODE XXXXXX	REVENUE CODE XXXXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
209	0836	385	04-00	Budgeted Cash / Special Assessments	14,819	
209	0836	341	16-02	Impact Fees / Fire Protection	10,471	
<b>TOTAL (if SUBTOTAL, check here <input type="checkbox"/>)</b>					385,637	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPT. CODE COUNTY / DFA XXXX-XXX	COST CENTER CODE XXXXXX	CATEGORY / LINE ITEM CODE XXX / XXXXX	CATEGORY / LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
<b>TOTAL (if SUBTOTAL, check here <input type="checkbox"/>)</b>						

# SANTA FE COUNTY

## RESOLUTION 1999 - 143

Name: Carolyn Cooney Dept/Div: Fire Administration Phone No.: 992-3072

**DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant name and award date, other laws, regulations, etc.):**

1712685

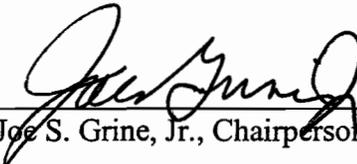
- 1) Please summarize the request and its purpose.  
This request is to budget FY99 Fire Fund cash balance, FY99 Fire Protection impact fee cash balance, FY99 Forest Fire reimbursement and miscellaneous revenue and FY00 Fire Protection impact fees for expenditure in FY00. Each district was requested to prioritize operating needs in order to budget funds in appropriate categories. Impact fees will be used for fire apparatus on trucks and new stations.
- 2) Why was this request not included in the Fiscal Year 2000 Operating Budget?  
At the time the FY00 Operating budget was being prepared the elements of this request were unknown or had not been determined.
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?  
This increase is anticipated to be non-recurring for FY00. Recurring costs, if any, will be covered with annual State Fire allotments.
- 4) Does this request impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following:  
The revenue sources for this request are State Fire Funds, Impact Fees, State Forest Fire reimbursements and property rental.
  - a) If this is a state special appropriation, cite statute and attach a copy.  
This request is not a state special appropriation.
  - b) If this is a state or federal grant, cite grant name, number, award date and amount.  
This request is not a state or federal grant.
  - c) If this request is a result of Commission action, please cite and attach a copy of supporting documentation.  
This request includes Fire Protection impact fees which is the result of Ordinance 1995-04, which imposed impact fees.
  - d) Please identify other funding sources that can be used to match this request.  
All available funding sources have been identified.
- 5) If this request impacts the Capital Purchases category, please detail items to be purchased and what they will be used for.  
Chimayo - \$1,395 Ram Fan for truck, El Dorado - \$48, 186 apparatus for trucks and station, Hondo - \$7,172 apparatus for new truck, Pojoaque - \$37,626 new main station, Stanley - \$5,790 main station renovation, Turquoise Trail - \$63,475 new main station, La Cienega \$55,578 extrication equipment and office equipment, Madrid - \$8,366 apparatus for new truck, Glorieta Pass - \$4,852 generator and communication equipment, Agua Fria - \$29,950 apparatus for trucks, \$5,000 furnishings for new station, Galisteo - \$14,757 extrication equipment and State Penitentiary - \$5,067 new truck.
- 6) Does this request have an FTE impact for the department/division? If request increases FTE, include number of positions, position type (term, permanent, etc.), and the future funding impact and revenue source.  
This request has no FTE impact.

**SANTA FE COUNTY**  
**RESOLUTION 1999 - 143**

**NOW, THEREFORE, BE IT RESOLVED** by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 30<sup>th</sup> Day of November, 1999.

Santa Fe Board of County Commissioners

  
\_\_\_\_\_  
Joe S. Grine, Jr., Chairperson



  
\_\_\_\_\_  
Rebecca Bustamante, County Clerk

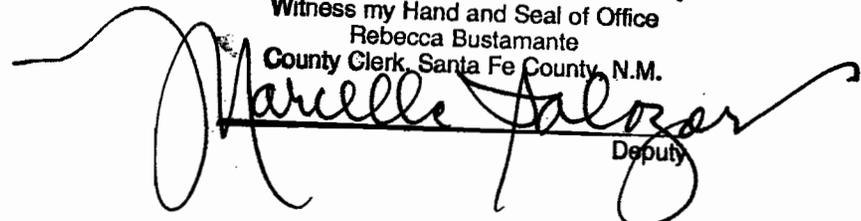
1712686

Approved As To Form.

By   
\_\_\_\_\_  
Denice Brown, County Attorney

1098 529  
COUNTY OF SANTA FE  
STATE OF NEW MEXICO )  
I hereby certify that this instrument was filed  
for record on the 1 day of DEC A.D.  
19 99, at 8:19 o'clock a m  
and was duly recorded in book 1712,  
page 680 - 686 of the records of  
Santa Fe County.

Witness my Hand and Seal of Office  
Rebecca Bustamante  
County Clerk, Santa Fe County, N.M.

  
\_\_\_\_\_  
Deputy