

**RESOLUTION 2005 - 92**

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

Whereas, the Board of County Commissioners meeting in regular session on June 28, 2005 did request the following budget adjustment:

Department / Division: Fire Administration / All Fire Districts Fund Name: Fire Impact Fees Fund (216)

Budget Adjustment Type: Budget Decrease Fiscal Year: 2005 (July 1, 2004 - June 30, 2005)

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
216	0831	385	04-00	Budgeted Cash / Special Assessments		5,757.73
216	0832	385	04-00	Budgeted Cash / Special Assessments		27,432.36
216	0833	385	04-00	Budgeted Cash / Special Assessments		67,320.66
216	0834	385	04-00	Budgeted Cash / Special Assessments		45,775.97
<b>TOTAL (if SUBTOTAL, check here X )</b>						<b>146,286.72</b>

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
216	0831	422	80-01	Capital Purchases / Buildings & Structures		5,757.73
216	0832	422	80-01	Capital Purchases / Buildings & Structures		27,432.36
216	0833	422	80-01	Capital Purchases / Buildings & Structures		67,320.66
216	0834	422	80-01	Capital Purchases / Buildings & Structures		45,775.97
<b>TOTAL (if SUBTOTAL, check here X )</b>						<b>146,286.72</b>

Requesting Department Approval: *Stan Holden* Title: Chief, Santa Fe County Fire Dept. Date 6/14/05  
 Finance Department Approval: *Susan H. Luna* Date: 6-21-05 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_  
 County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

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**BUDGET ADJUSTMENT CONTINUATION SHEET**

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
216	0836	385	04-00	Budgeted Cash / Special Assessments		155,723.45
216	0837	385	04-00	Budgeted Cash / Special Assessments		28,811.51
216	0838	385	04-00	Budgeted Cash / Special Assessments		165,137.10
216	0840	385	04-00	Budgeted Cash / Special Assessments		331,950.94
216	0841	385	04-00	Budgeted Cash / Special Assessments		14,550.65
216	0843	385	04-00	Budgeted Cash / Special Assessments		1,161,361.96
<b>TOTAL (if SUBTOTAL, check here )</b>						<b>2,003,822.33</b>

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
216	0836	422	80-01	Capital Purchases / Buildings & Structures		155,723.45
216	0837	422	80-01	Capital Purchases / Buildings & Structures		28,811.51
216	0838	422	80-01	Capital Purchases / Buildings & Structures		165,137.10
216	0840	422	80-01	Capital Purchases / Buildings & Structures		331,950.94
216	0841	422	80-01	Capital Purchases / Buildings & Structures		14,550.65
216	0843	422	80-01	Capital Purchases / Buildings & Structures		1,161,361.96
<b>TOTAL (if SUBTOTAL, check here )</b>						<b>2,003,822.33</b>

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**DEPARTMENT CONTACT:**

Name: Donna Morris

Dept/Div: Fire Administration/All Fire Districts

Phone No.: 992-3082

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

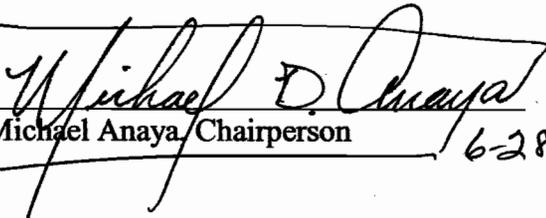
- 1) Please summarize the request and its purpose.  
This request is for a budget decrease to the Fire Impact Fees Fund (216) to reverse Resolution 2005-25 to adjust the cash balances carried forward to fiscal year 2005.
- 2) Why was this request not included in the fiscal year 2005 Operating Budget?  
During the preparation of the FY 05 Operating Budget Process, this information was unknown.
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?  
This decrease is non-recurring. A separate resolution will bring forward the correct beginning balances for the Fire Impact Fees Fund (216).
- 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:
  - 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 is not the result of Commission action.
  - d) Please identify other funding sources that can be used to match this request.  
All 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.  
This request will decrease the buildings and structures line item in various fire districts utilizing fire impact fees.
- 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 will have no FTE impact.

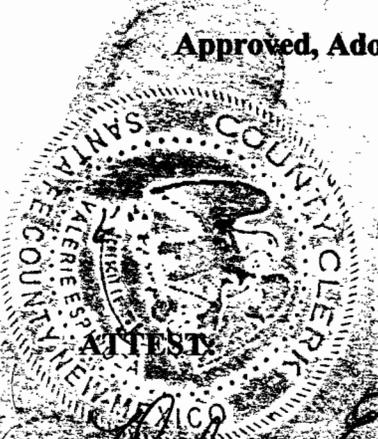
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NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 28<sup>th</sup> day of June 2005.

Santa Fe Board of County Commissioners

  
Michael Anaya, Chairperson 6-28-05

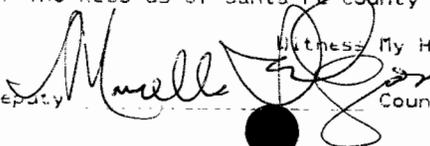


  
Valerie Espinoza, County Clerk 6-28-05



Approved As To Form.

By   
Stephen Ross, County Attorney

COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) ss  
BCC RESOLUTIONS  
PAGES 4  
I Hereby Certify That This Instrument Was Filed for  
Record On The 29<sup>TH</sup> Day Of June, A D . 2005 at 09 27  
and Was Duly Recorded as Instrument # 1386550  
Of The Records Of Santa Fe County  
  
Deputy \_\_\_\_\_ Witness My Hand And Seal Of Office  
Valerie Espinoza  
County Clerk, Santa Fe NM