

SANTA FE COUNTY

SFC RECORDED 08/25/2009

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RESOLUTION 2009 - 150

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

Whereas, the Board of County Commissioners meeting in regular session on August 25, 2009, did request the following budget adjustment:

Department / Division: Growth Mgmt/Public Works Div/Water/Wastewater Operations Fund Name: Capital Outlay GRT Fund - 213

Budget Adjustment Type: Budget Increase Fiscal Year: 2010 (July 1, 2009 - June 30, 2010)

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
505	0000	305	0500	Budgeted Cash	50,000	
TOTAL (if SUBTOTAL, check here)					50,000	

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
505	1448	444	8097	Capital Outlay – Agua Fria/Ben Lane Sewer (Not County Asset)	50,000	
TOTAL (if SUBTOTAL, check here)					50,000	

Requesting Department Approval: [Signature] Title: Manager Date: 8/5/09

Finance Department Approval: [Signature] Date: 8/18/09 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Millie Valdivia Dept/Div: Water/Wastewater Operations Phone No.: (505) 992-9874

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 to increase budgeted cash and expenditures related to the Capital Outlay Agua Fria/Ben Lane Sewer – Non County Asset construction project utilizing Water/Wastewater Operations' Capital Reserve funds. The County is responsible for an NMED Grant in the amount of \$50,000 (SAP 07-4567-GF) for construction of a majority of the project, but the funds are insufficient to cover the total cost of this project (other costs are engineering & surveying, and construction management), thereby requiring the County to fund the difference.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title

b) Professional Services (50-xx) and Capital Category (80-xx) detail:

Line Item	Detail (what specific things, contracts, or services are being added or deleted)	Amount
505-1448-444-8097	Agua Fria/Ben Lane Sewerline Extension	50,000

- 2) Is the budget action for RECURRING expense _____ or for NON-RECURRING (one-time only) expense X

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Millie Valdivia Dept/Div: Water/Wastewater Operations Phone No.: (505) 992-9874

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

- 3) 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, YES _____ NO X
If YES, cite statute and attach a copy.
 - b) Does this include state or federal funds? YES _____ NO X
If YES, please cite and attach a copy of statute, if a special appropriation, or include grant name, number, award date and amount, and attach a copy of a award letter and proposed budget.
 - c) Is this request is a result of Commission action? YES _____ NO X
If YES, please cite and attach a copy of supporting documentation (i.e. Minutes, Resolution, Ordinance, etc.).
 - d) Please identify other funding sources used to match this request.

N/A

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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 25th Day of August, 2009.

Santa Fe Board of County Commissioners


Michael D. Anaya, Chairperson

ATTEST:


Valerie Espinoza, County Clerk

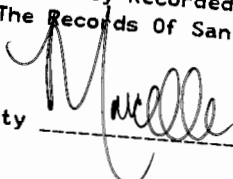


COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 4

I Hereby Certify That This Instrument Was Filed for
Record On The 25TH Day Of August, 2009 at 03:41:09 PM
And Was Duly Recorded as Instrument # 1575235
Of The Records Of Santa Fe County

Deputy


Witness My Hand And Seal Of Office
Valerie Espinoza
County Clerk, Santa Fe, NM