

**GENERAL FACT SHEET**

03-136

**BILL NUMBER**

**BRIEF TITLE**

1997 Uniform Mechanical Code  
With amendments

**APPROVAL DEADLINE**

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**REASON**

To update the Lincoln Heating, Ventilating  
And Cooling Code

**DETAILS**

**POSITIONS/RECOMMENDATIONS**

<p>A proposed legislation to revise and update Title 25 of the Lincoln Municipal Code by adopting the 1997 ICBO Uniform Mechanical Code with new and revised local amendments.</p>	Sponsor	
	Program Departments, or Groups Affected	All automated departments Building & Safety Dept., construction industry, and homeowners.
	Applicants/Proponents	Applicant  City Department Building & Safety Department  Other
<p>Discussion (Including Relationship to other Council Actions)</p> <p>A Heating, Ventilating, and Cooling Code Task Force held 16 meetings to review the HVAC Code. Task Force members were HVAC contractors, a Mechanical Engineer, and Building &amp; Safety Dept. staff. The Task Force results were submitted to the Code Study Committee. The Code Study Committee approved the proposed code with some language changes.</p>	Opponents	Groups or Individuals  Basis of Opposition
	Staff Recommendations	x For      Against Reason Against
	Board or Commission Recommendation	BY For      Against No Action Taken For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	Pass Pass (As Amended) Council Sub. Without Recommendation Hold Do not Pass

POLICY/PROGRAM IMPACT

We request an effective date of October 1, 2003

<b>POLICY OR PROGRAM CHANGE</b>	NO	YES
	_____	_____
<b>OPERATIONAL IMPACT ASSESSMENT</b>	_____	_____
	_____	_____
<b>FINANCES</b>		
<b>COST AND REVENUE PROJECTIONS</b>	COST of total project:	\$ _____
	COST of this Ordinance/Resolution	\$ _____
	RELATED annual operating Costs	\$ _____
	INCREASE REVENUE EXPECTED/YEAR	\$ _____
<b>SOURCE OF FUNDS</b>	CITY [Approximately]	
	_____	\$ _____ %
	_____	\$ _____ %
	_____	\$ _____ %
	NON CITY [Approximately]	
	_____	\$ _____ %
	_____	\$ _____ %
	_____	\$ _____ %
<b>BENEFIT COST</b>		
Front Foot		Average Assessment
Square Foot	\$ _____	\$ _____

APPLICABLE DATES:

ACT SHEET PREPARED BY: R.Peery, Building & Service Manager

REVIEW BY:

REFERENCE NUMBER