

GENERAL FACT SHEET

BRIEF TITLE

REASON

Adopting the City of Lincoln
ADA/Section 504 Rehabilitation Act Policy

DETAILS

POSITIONS/RECOMMENDATIONS

<p>Reason for Legislation</p> <p>Federal Compliance Requirements for the receipt of federal-aid transportation project funds mandate that the City, as a local public agency, has in place a written ADA/Section 504 Rehabilitation Act Policy to qualify for receipt of such federal funds.</p>	<p>Sponsor</p> <p>Greg MacLean</p>
<p>Discussion (Including Relationship to other Council Actions)</p>	<p>Programs, Departments, or Groups Affected</p> <p>All City Departments</p>
	<p>Applicants/Proponents</p> <p>Applicant</p> <p>Greg MacLean</p> <p>City Department</p> <p>Public Works & Utilities</p> <p>Other</p>
	<p>Opponents</p> <p>Groups or Individuals</p> <p>Basis of Opposition</p>
	<p>Staff Recommendation</p> <p><input checked="" type="checkbox"/> For <input type="checkbox"/> Against Reason Against</p>
	<p>Board or Commission Recommendation</p> <p><input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)</p>
	<p>CITY COUNCIL ACTIONS</p> <p>(FOR COUNCIL USE ONLY)</p> <p><input type="checkbox"/> PASS <input type="checkbox"/> PASS (AS AMENDED) <input type="checkbox"/> COUNCIL SUB. <input type="checkbox"/> WITHOUT RECOMMENDATION <input type="checkbox"/> HOLD <input type="checkbox"/> DO NOT PASS</p>

DETAILS

POLICY/PROGRAM IMPACT

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

APPLICABLE DATES:

FACT SHEET PREPARED BY: Don Taute, Assistant City Attorney

REVIEW BY:

REFERENCE NUMBER