

GENERAL FACT SHEET

12-2

BILL NUMBER

BRIEF TITLE	APPROVAL DEADLINE	REASON
Amending LMC Chapter 10.16 (Driving	_____	_____
While Intoxicated, Unlicensed, or Uninsured)	_____	_____
so as to comply with state statute	_____	_____

DETAILS

POSITIONS/RECOMMENDATIONS

<p>An ordinance amending Chapter 10.16 of the Lincoln Municipal Code (Driving While Intoxicated, Unlicensed or Uninsured) by amending Section 10.16.030 relating to the penalty for driving under the influence of alcoholic liquor to comply with state statute; by amending Section 10.16.040 relating to the penalty for refusing to submit to a chemical test of blood, breath or urine test to determine the concentration of alcohol or the presence of drugs in such blood, breath or urine to comply with state statute; and amending Section 10.16.045 relating to restrictions imposed for a second violation of Section 10.16.030 or 10.16.040 to comply with state statute</p>	Sponsor	Law Department
	Program Departments, or Groups Affected	
	Applicants/Proponents	Applicant Law Department City Department Other
	Opponents	Groups or Individuals Basis of Opposition
<p>Discussion (Including Relationship to other Council Actions)</p>	Staff Recommendations	<input checked="" type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	BY <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)
	CITY COUNCIL ACTIONS (For Council Use Only)	<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

DETAILS

POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input type="checkbox"/> NO <input type="checkbox"/> YES _____ _____ _____
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____
	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: John C. McQuinn, Chief City Prosecutor

REVIEW BY:

REFERENCE NUMBER