

City Council Introduction:

BILL NUMBER: _____

Public Hearing:

Date Factsheet Prepared:

FACTSHEET

Instructions: If a question does not apply, just put "NA". Please try to keep it to **ONE** page only. Submit **one original**, with your Request Form, to City Clerk.

TITLE:

BOARD/COMMITTEE:

APPLICANT:

RECOMMENDATION:

STAFF
RECOMMENDATION:

OTHER DEPARTMENTS
AFFECTED:

SPONSOR:

OPPONENTS:

REASON FOR LEGISLATION

DISCUSSION / FINDINGS OF FACT:

POLICY OR PROGRAM CHANGE: ____ Yes ____ No

OPERATIONAL IMPACT ASSESSMENT:

COST OF TOTAL PROJECT:

RELATED ANNUAL OPERATING COSTS:

SOURCE OF FUNDS:

CITY:

NON CITY:

FACTSHEET PREPARED BY:

DATE:

REVIEWED BY:

DATE: