

SEMINOLE COUNTY BUDGET CHANGE REQUEST

Date 5/12.03 OMB# 03-57

FROM: Department Environmental Svcs Division _____ Section Water & Wastewater

Signatures: Department Director _____ Division Manager Robert G. Adolphe, PE

WHAT IS NEEDED:

- Accounting adjustment: Item is budgeted, but funds are in incorrect account line.
- More funds for Budgeted Item: Item is budgeted, but additional funds are required.
New item: Item is not in this fiscal year's budget.
- Capital Substitution: Substitution or change of a currently budgeted capital item.
- Fund & Acct # _____ Budget Item # _____ Budget Amount \$ _____
- Capital replacement retention: Capital item was slated to be replaced but needs to be retained. BCC# _____

- Describe item and show calculation of all associated costs of item.
- Explain why item is needed. (If equipment is to be replaced, include description, model, year, BCC#)
- Identify source of funds and why these funds are no longer needed for their original intent.
- For savings on capital items give account #, budget item #, amount budgeted, purchase order #, and actual purchase cost.

Additional funds are needed to cover the overtime budget due to:

- Additional security checks that were required as part of the Homeland Security Orange Alert for several months and projected additional for this year
- The new hydrant maintenance program to meet the requirements of the Insurance Services Office (ISO). This program will allow for a better ISO classification and should reduce Seminole County customer's insurance rates
- Increased number of minor and major utility repairs has accelerated the use of the overtime budget
- The addition of the Water Operations on call program to allow for expeditious response to emergencies

FILL IN THIS PORTION IF A TRANSFER OF FUNDS IS NEEDED: Fund # 401 Fund Name Water and Sewer

	ACCOUNT NUMBER	ACCOUNT TITLE	AMOUNT
	40100-087801-53043000	Utilities	132,640
TRANSFER FROM	_____	_____	_____
	_____	_____	_____
		TOTAL	132,640
TRANSFER TO	40100-087801-51014000	Overtime	132,640
	_____	_____	_____
		TOTAL:	132,640

CONCURRENCE OF OTHER INVOLVED DIVISIONS (ie: Comp Svcs/hard & software; Fleet/vehicles; Purchasing/capital; Sppt. Svcs; etc)

Signature _____

Div or Dept _____

OMB RECOMMENDATION: Approval Disapproval Analyst Amanda Hayes Director _____

APPROVING AUTHORITY: _____ OMB Director _____ County Manager BCC (Meeting Date) 5-27-03

Approved Not approved Date Signed _____ Signature _____

FINANCE: Transfer has been posted Date _____ Signature _____