**Fiscal Impact Statement**

*Updated 1/29/2020 to satisfy City Code §219.07*

|  |  |
| --- | --- |
| ***Department*** | Mobility and Infrastructure |
| ***Preparer*** | Sophia Yarish |
| ***Standing Committee Representative*** | Kimberly Lucas |
| ***Type of Legislation*** | Contract Authorization |

**Description of Legislation**

Resolution providing for a supplemental agreement with the Larson Design Group, Inc. for costs associated with the CBD Signals Phase 3 Project; providing for the payment of the costs thereof, not to exceed Seven Hundred and Thirteen Thousand Four Hundred and Nine Dollars and Seventy Four Cents ($713,409.74), an increase of Forty Seven Thousand Seven Hundred and Ninety Two Dollars and Forty Six Cents ($47,792.46).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Total Cost*** | $ 47,792.46 | | | |
| ***Frequency of Expenditure*** | One-Time | | Multi-Year | |
| ***Funding Source*** | Operating | Capital | Grant | Trust Fund |
| ***Is this item budgeted?*** | Yes | | No | |

**JDE Account Information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **JDE JOB NO.** | **JDE FUND** | **BUDGET YEAR** | **PREVIOUS AMOUNT** | **CURRENT AMOUNT** | **TOTAL AMOUNT** | **SOURCE** |
| 4026722216 | 40114 | 2016 | $532,493.82 | - | $532,493.82 | FHWA |
| 4026722216 | 40114 | 2016 | $133,123.46 | - | $133,123.46 | BOND |
| 4426722214 | 40114 | 2014 |  | $38,233.97 | $38,233.97 | FHWA |
| 4426722214 | 40114 | 2014 |  | $9,558.49 | $9,558.49 | PayGo |
|  |  | **TOTAL** | **$665,617.28** | **$47,792.46** | $713,409.74 |  |

**Additional Operational Costs**

Ongoing maintenance after project completion.

**Impact on City Revenue**

**No anticipated impact on City revenue.**

**If the resolution authorizes a professional services contract, complete this page:**

|  |  |  |  |
| --- | --- | --- | --- |
| ***Method of Procurement***  *Select one.* | RFP | Signed Waiver from OMB | Amendment to Existing Contract  *Do not fill out the rest of the form.* |

**Name of Vendor and Award Justification**

List the name of the awarded vendor and its qualifications.

**Other Respondents**

List the other respondents. If there were none, clearly state that.

**Selection Criteria**

**Selection Committee Representation**

**Waiver Justification**

If a waiver was granted, explain the justification.

**EORC Synopsis**

This activity was bid through PennDOT’s ECMS process.

|  |  |  |
| --- | --- | --- |
| ***Date Presented at EORC:*** Insert date. | Approved | Not Approved |

*Per §219.07 of the City Code, you* ***must*** *include an electronic copy of the solicitation or your signed waiver with your submission to the Office of Management and Budget.*

**Attachments**

* *Please attach any additional documents and/or exhibits.*