**301**

**Fiscal Impact Statement**

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

|  |  |
| --- | --- |
| ***Department*** | Department of Public Safety |
| ***Preparer*** | Anthony Landolina |
| ***Standing Committee Representative*** | Anthony Landolina |
| ***Type of Legislation*** | Other |

**Description of Legislation**

The City of Pittsburgh will submit a grant application that also serves as the grant agreement to the Pennsylvania Commission on Crime and Delinquency to reimburse Public Safety overtime costs accrued during the Tree of Life Shooting and Rosfeld Trial. The Tree of Life incident required deployment of our Special Deployment Division and additional Pittsburgh Bureau of Police personnel during the event and the following weeks. The Rosfeld trial required police call-out and holiday pay for nearly two weeks prior to, during, and following the verdict. Grant funding to support the City of Pittsburgh's Public Safety Department will alleviate some of the financial burden incurred during these major events of 2018 and 2019

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| --- | --- | --- | --- | --- |
| ***Total Cost*** | $ 1,500,000.00 | | | |
| ***Frequency of Expenditure*** | One-Time | | Multi-Year | |
| ***Funding Source*** | Operating | Capital | Grant | Trust Fund |
| ***Is this item budgeted?*** | Yes | | No | |

**JDE Account Information**

11101.230000.45.45505

**Additional Operational Costs**

N/A There are no matching funds required for this Grant

**Impact on City Revenue**

N/A

**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**

Describe the selection or scoring criteria.

**Selection Committee Representation**

List the department(s) or bureau(s) represented on the committee. Do not list individual names.

**Waiver Justification**

If a waiver was granted, explain the justification.

**EORC Synopsis**

Insert synopsis that was presented.

|  |  |  |
| --- | --- | --- |
| ***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.*