



COMMUNITY & ECONOMIC DEVELOPMENT OFFICE

149 CHURCH STREET • ROOM 32 • CITY HALL • BURLINGTON, VT 05401

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www.burlingtonvt.gov/cedo

TO: Board of Finance and City Council
FROM: Darlene Kehoe, Assistant Director for Finance
Brian Pine, Assistant Director for Housing & Neighborhood Revitalization
DATE: March 1, 2013
RE: FY13 Budget Amendments for Lead Hazard Control and
Housing Trust Fund

The Community & Economic Development Office (CEDO) respectfully requests approval to increase line items within our budget to account for anticipated expenditures through June 30, 2013.

The attached spreadsheet contains the budget increases by line item category.

The Lead Hazard Control amendments are necessary because several budget projections prepared for FY2013 have proven to be insufficient to cover program expenses. In November 2011, HUD awarded the City a 3-year grant of \$2,475,000. For a variety of reasons, implementation of the grant did not proceed at the pace that we projected, resulting in lower expenditures than projected for FY2012. We are now enrolling more homes and addressing lead hazards at a faster rate. All of the increase in costs for FY13 is the result of increased activity, and is 100% reimbursable under the grant. The grant extends into FY15, with a projected completion date of October 31, 2014. This amendment is budget-neutral as there will be an offsetting increase in the budget for federal grant revenue.

The Housing Trust Fund amendments are necessary because there was a balance of funds from FY2012. While these funds were already obligated with grant agreements, the projects did not proceed on schedule. This resulted in a fund balance that must be transferred from FY2012 to FY2013.

Cc: Peter Owens, Director
Scott Schrader, Assistant CAO

Community and Economic Development Office

FY 13 Budget Amendments - LEAD HAZARD CONTROL

Account Name	Account Number	Amount
INCREASE:		
Revenue:		
Grant General Government Operating	301.31.305.317.4875_110	<u>157,500.00</u>
INCREASE:		
Expenditures:		
Postage	301-31-305-317-6005	500.00
Shipping & Moving	301-31-305-317-6007	1,500.00
Printing/Copying/Paper Mgt	301-31-305-317-6202	500.00
Custodian Supplies	301-31-305-317-6206	500.00
Outreach	301-31-305-317-6246	5,000.00
Lead Hazard Control	301-31-305-317-6278	100,000.00
Utilities Electricity	301-31-305-317-6400_100	1,000.00
Utilities Gas	301-31-305-317-6400_105	1,000.00
Contractual Services	301-31-305-317-6500_118	3,000.00
Interpreter Services	301-31-305-317-6500_148	1,000.00
Environmental Testing Services	301-31-305-317-6500_151	10,000.00
Laboratory Analysis	301-31-305-317-6500_154	5,000.00
Occupant Relocation	301-31-305-317-6500_157	20,000.00
Custodial Contracts	301-31-305-317-6610	1,000.00
Travel & Training Special Training	301-31-305-317-6700_105	2,000.00
Travel & Training Travel Expense	301-31-305-317-6700_110	3,500.00
Travel & Training Mileage	301-31-305-317-6700_115	500.00
Program Delivery	301-31-305-317-7702	1,500.00
Total Expenditures		<u>157,500.00</u>

FY 13 Budget Amendments - HOUSING TRUST FUND

Account Name	Account Number	Amount
INCREASE:		
Program revenues	301-31-305-316-6290	<u>222,863.87</u>
INCREASE:		
Program expenses	To be provided by CEDO	<u>222,863.87</u>

CITY OF BURLINGTON, VT
COMMUNITY AND ECONOMIC DEVELOPMENT OFFICE
BUDGET ADJUSTMENT REQUEST

This form is to be used only for budget adjustments that involve amounts of \$25,000 or less, and that do not increase or decrease a department's net revenues (expenses). In other words, adjustments requested must be budget neutral and within your own department.

Person Requesting Adjustment: Darlene Kehoe

Briefly explain the reason for the adjustment: Amended Lead Hazard Control Budget Adjustment for Occupant Relocation of \$20,000

Budget Adjustment Details: Please provide details of the adjustment in the following format (attach as a separate Excel worksheet).

<u>Account Number</u>	<u>Account Name</u>	<u>Increase Expense</u> <u>(Decrease Revenue)</u>	<u>Increase Revenue</u> <u>(Decrease Expense)</u>
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Submitted by: _____ **Date** _____

Approvals:

Chief Administrative Officer

If over \$10,000: _____
Mayor

Date

Date

Processed by: _____ **Date** _____

DEPARTMENT: CEDO

DEPARTMENT: CEDO

[illegible]

