GENERAL FACT SHEET

BRIEF TITLE	APPROVAL DEADLINE	REASON
6.04.150 Shelter Fees; Release from Shelter		

DETAILS

POSITIONS/RECOMMENDATIONS

DETAILS		POSITIONS/RECOMMENDATIONS
This revision increases the impoundment fees as follows: Current: Proposed: 1st Impoundment $20.00 $35.00 2nd Impoundment $30.00 $50.00* 3rd Impoundment $35.00 $75.00* 4th Impoundment $45.00 $25.00 x each prior impoundment* *within 12 months of the 1st impoundment	Sponsor	Health/Animal Control
	Program Departments, or Groups Affected	Animal Control Division/Health
	Applicants/ Proponents	Applicant Animal Control City Department Health Law Other Citizens, Animal Control Advisory Committee
Discussion (Including Relationship to other Council Actions) The fee structure will encourage pet owners to be more responsible. Additionally the revenue will help cover the cost of shelter operations. The Animal Control Advisory Committee approved the proposed fee structure at their September 6, 2005 meeting.	Opponents	Groups or Individuals None specifically identified Basis of Opposition
	Staff Recommendations	X For ❑ Against Reason Against
	Board or Commission Recommendation	BY Board of Health 9-13-05 X For ❑ Against ❑ No Action Taken ❑ For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	❑ Pass ❑ Pass (As Amended) ❑ Council Sub. ❑ Without Recommendation ❑ Hold ❑ Do not Pass

DETAILS   POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	X NO ❑ YES We already collect or require impoundment fees.
	OPERATIONAL IMPACT ASSESSMENT	The revenue will help cover cost of shelter operations.

FINANCES

COST AND REVENUE PROJECTIONS	COST of total project: $ -0- COST of this Ordinance/ Resolution $ -0-
	RELATED annual operating Costs Shelter operating $168,000
	INCREASE REVENUE EXPECTED/YEAR $ 555.00
SOURCE OF FUNDS	CITY [Approximately] _____$_____%____ _____$_____%____ _____$_____%____ NON CITY [Approximately] _____$_____%____ _____$_____%____ _____$_____%____
BENEFIT COST ❑ Front Foot ❑ Square Foot	Average Assessment $_____ $_____

APPLICABLE DATES: When approved by City Council.

FACT SHEET PREPARED BY: Jim Weverka, Animal Control Manager
                           for Bruce Dart, Health Director

REVIEW BY:

REFERENCE NUMBER