

GENERAL FACT SHEET

12-94

BILL NUMBER

BRIEF TITLE	APPROVAL DEADLINE	REASON
An ordinance amending LMC Chapter 5.56	_____	_____
relating to fire alarm permits & fees for	_____	_____
false fire alarms	_____	_____

DETAILS

POSITIONS/RECOMMENDATIONS

<p>An ordinance amending Chapter 5.56 of the Lincoln Municipal Code relating to Emergency Alarm Systems by amending Section 5.56.010 to revise and add definitions; amending Sections 5.56.025 and 5.56.030 to require fire alarm businesses and fire alarm users, respectively, to obtain the permits required in this chapter; amending Sections 5.56.040, 5.56.050, and 5.56.055 to provide fees for false fire alarms..</p>	Sponsor	Jeff Kirkpatrick, Assistant City Attorney
	Program Departments, or Groups Affected	
	Applicants/ Proponents	<p>Applicant</p> <p>City Department</p> <p>Other</p>
<p>Discussion (Including Relationship to other Council Actions)</p>	Opponents	<p>Groups or Individuals</p> <p>Basis of Opposition</p>
	Staff Recommendations	<input checked="" type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

DETAILS

POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input type="checkbox"/> NO <input type="checkbox"/> YES _____ _____ _____		
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____		
	FINANCES			
	COST AND REVENUE PROJECTIONS	COST of total project:		\$ _____
		COST of this Ordinance/ Resolution		\$ _____
		RELATED annual operating Costs		\$ _____
	INCREASE REVENUE EXPECTED/YEAR		\$ _____	
SOURCE OF FUNDS	CITY [Approximately]			
		\$ _____	% _____	
		\$ _____	% _____	
		\$ _____	% _____	
	NON CITY [Approximately]			
		\$ _____	% _____	
	\$ _____	% _____		
	\$ _____	% _____		
BENEFIT COST				
<input type="checkbox"/> Front Foot			Average Assessment	
<input type="checkbox"/> Square Foot		\$ _____	\$ _____	

APPLICABLE DATES:

FACT SHEET PREPARED BY: Jeff Kirkpatrick, Assistant City Attorney

REVIEW BY:

REFERENCE NUMBER