



# City of Santa Fe Impact Report

Requested By: Name(s) of Elected Official(s) Date: \_\_\_\_\_

Bill: \_\_\_\_\_ Resolution: \_\_\_\_\_ Expected Date of Introduction: \_\_\_\_\_

## Section 1. Introduction: (to be completed by primary sponsor)

1.1 Synopsis of Legislation: \_\_\_\_\_  
\_\_\_\_\_

1.2 Proposed Funding Source (if applicable): \_\_\_\_\_

1.3 Community Impact: Briefly describe the major positive or negative effects the Bill/Resolution might have on the community including, but not limited to, businesses, neighborhoods, families, children and youth, social service providers and other institutions such as schools, churches, etc.  
\_\_\_\_\_

1.4 Consequences of Not Enacting This Bill/Resolution: Are there consequences of not enacting this bill/resolution? If so, describe.  
\_\_\_\_\_

1.5 Department(s) Effected by Legislation: \_\_\_\_\_

1.6 Proposed Committee Review Dates: (to be completed by legislative liaison)

Public Utilities \_\_\_\_\_ Public Works \_\_\_\_\_ Finance \_\_\_\_\_

Other \_\_\_\_\_ Other \_\_\_\_\_ City Council \_\_\_\_\_

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### If applicable, see corresponding section, attached hereto:

**Section 2.**  
Legal Conflicts and Risks:  Applicable  Not Applicable \_\_\_\_\_  
City Attorney Date

**Section 3.**  
Department Impact:  Applicable  Not Applicable \_\_\_\_\_  
Department Director Date

**Section 4.**  
Budget Impact:  Applicable  Not Applicable \_\_\_\_\_  
Department Director Date

**Section 5.**  
Technological Resources Review/Impact:  Applicable  Not Applicable \_\_\_\_\_  
ITT Director Date

**Section 6.**  
Human Resources Impact:  Applicable  Not Applicable \_\_\_\_\_  
Human Resources Director Date

**Section 7.**  
Financial Impact Analysis:  Applicable  Not Applicable \_\_\_\_\_  
Finance Director Date

Approved by Primary Sponsor: \_\_\_\_\_

**Section 2. Legal Conflicts and Risks (City Attorney)**

**2.1. Conflicts:** Does this proposed bill/resolution duplicate/conflict with/companion to/relate to any City code, approved ordinance or resolution, other adopted policies or proposed legislation? Include details of city adopted laws/ordinance/resolutions and dates. Summarize the relationships, conflicts or overlaps.

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**2.2. Technical Issues:** Are there incorrect citations of law, drafting errors or other problems? Are there any amendments that should be considered? Are there any other alternatives which should be considered? If so, describe.

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**Section 3. Department Impact (Department Director):**

**3.1 Operational Impact:** Describe significant issues and administrative and fiscal implications of proposed legislation.

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**3.2 Personnel Needs:** Describe the personnel impacts, including additional staffing required to implement the legislation.

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**3.3 Technological Needs:** Describe the technological impacts, including capital outlay needs.

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**Section 4. Budget Impact (Department Director):**

**4.1. Revenue Sources:** Describe Impact to Revenues

Type of Revenue	Impact to Current Budget	Impact to Future Budget	
		Base Budget	Expansion
		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
Total:		\$ _____	\$ _____

**4.2. Expenditures: Describe Impact to Expenditures**

Expenditure Classification	Impact to Current Budget	Impact to Future Budget	
		Base Budget	Expansion
Personnel*		\$ _____	\$ _____
Benefits		\$ _____	\$ _____
Operating Expenses		\$ _____	\$ _____
Professional Services		\$ _____	\$ _____
Capital Outlay		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
Total:		\$ _____	\$ _____

\* Any indication that additional staffing would be required must be reviewed and approved in advance by the City Manager by attached memo before release of FIR to committees.

**Section 5. Review/Impact on Budget (Department Director):**

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**Section 6. Technological Resources Review/Impact (ITT Director):**

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**Section 7. Human Resources Review/Impact (HR Director)**

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**Section 8. Financial Impact Analysis to the City: (to be completed by Finance Director)**

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Coordinated by: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_