

DEPARTMENT: Public Works

Michael D. Edwards
Public Works Director

Phone: 966-3222

RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes ___ No X)

Resolution approving the purchase of three fixed assets and transferring available funds within the Transportation Planning budget. The cost for each item will not exceed \$3,000, so informal bids will be obtained in accordance with County policy.

1. **Video camera:** This item will be used for the road inventory. It can also be used for Planning Department work and presentations. It could be used for various projects, including the traffic model, town corridor study and developing detail for capital improvement projects. Maximum cost: \$1,000.
2. **Reflectivity meter:** This equipment will be used for the sign inventory. It will decrease the need for night studies and overtime for the traffic and sign crew to determine proper reflectivity. Also, it will be useful in upgrading our signage for safety reasons. Maximum cost: \$3,000.
3. **Laserjet 11 x 17 large format printer:** This will give us the capability to produce maps and diagrams that we currently are unable to do. The larger format can be used for Board of Supervisors' presentations, reports, and budgets, as well as various projects such as the traffic model, town corridor study and development of detail for capital improvement projects. Maximum cost: \$3,000.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

In the past, the Board has approved such needed fixed assets from available savings.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

1. Do not approve purchase of all three items. Improved level of service to the public would not be realized.
2. Approve only one or two of the items for purchase.

COSTS: () Not Applicable	
A. Budgeted current FY	\$ _____
B. Total anticipated costs	\$ 7,000
C. Required additional funding	\$ 7,000
D. Internal transfers	\$ 7,000

SOURCE: () 4/5th Vote Required	
A. Unanticipated revenues	\$ _____
B. Reserve for contingencies	\$ _____
C. Source description: <u>TRANSPORTATION PLANNING</u>	

Balance in Reserve Contingencies, if approved: \$ _____

SPECIAL INSTRUCTIONS:
List the attachments and number the pages consecutively:

1. Budget Action Form

CLERK'S USE ONLY
 Res. No.: 95-255 Ord. No. _____ This item on agenda as:
 Vote - Ayes: 4 Noes: None
 Absent: _____ Abstained: _____
 Approved () Denied
 () Minute Order Attached () No Action Necessary

The foregoing instrument is a correct copy of the original on file in this office.

Date: _____
ATTEST: MARGIE WILLIAMS, Clerk of the Board
County of Mariposa, State of California

By: _____
Deputy

ADMINISTRATIVE OFFICER'S RECOMMENDATION:

- Recommended
- Not Recommended
- For Policy Determination
- Submitted with Comment
- Returned for Further Action

Comment: _____

A.O. Initials: ME

COUNTY OF
MARIPOSA

BUDGET ACTION FORM

DEPT/DIV: Public Works

CONTACT: Michael D. Edwards

DATE: May 19, 1995

PHONE: 966-5356

ACTION REQUESTED: (Check All That Apply)

- Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the County Budget, or in any one fund of the budget, or appropriating Reserve for Contingencies;
- Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriation from one budget to another, or between categories within a budget unit;
- Transfer by Administrator: Moving existing appropriations within a single budget category between line items (i.e. services and supplies, etc.);
- Transfer by Auditor: Moving salaries between line items to accommodate variances internal to salaries; OR transfers within the County budget under \$50.00 to accommodate minor variations from the budget.

<u>FUND/DEPT/ACCT NO.</u>	<u>LINE ITEM DESCRIPTION</u>	<u>AMOUNT (FROM)/TO</u>
033-0251-577-0418	Transportation Planning Professional Services/Contracts	\$7,000
033-0251-577-0680	Video Camera	\$1,000
033-0251-577-0681	Reflectivity Meter	\$3,000
033-0251-577-0682	Lazerjet 11x17 printer	\$3,000

Justification: See attached Board item.

Department Head Signature: *Michael D. Edwards* Date: 5/22/95
 Approved By: Res. No. 95-355 Clerk: mw Date: 6-6-95
 Administrator: *[Signature]* Date: 5/26/95
 Auditor: _____ Date: _____

AUDITOR'S USE ONLY:

Description: _____ Transfer No.: _____
 _____ B.R. No.: _____