

FISCAL IMPACT STATEMENT

DATE: June 27, 2025
FROM (Dept.): CAO & Office of Management & Budget
CONTACT: Rebecca Bombero rbombero@newhavenct.gov **PHONE** 203-946-7903

SUBMISSION ITEM (Title of Legislation):

ORDINANCE AMENDMENT TO APPROPRIATING ORDINANCE #1 RECLASSIFYING
POSITION #9956 GEO INFO SYSTEM ANALYST TO SUPERVISOR OF CRIME ANALYSTS
WITHIN THE NEW HAVEN POLICE DEPARTMENT

| | |
|--------------|--|
| List | Describe in as much detail as possible both personnel and non-personnel costs; |
| Cost: | general, capital or special funds; and source of funds currently budgeted for this purpose. |

| | | | | CAPITAL/LINE ITEM/DEPT/ACT/OBJ CODE |
|-------------------------|---------|---------|------|---|
| | GENERAL | SPECIAL | BOND | |
| A. Personnel | \$0 | \$0 | \$0 | |
| 1. Initial start up | \$0 | \$0 | \$0 | |
| 2. One-time | \$0 | \$0 | \$0 | |
| 3. Annual | \$0 | \$0 | \$0 | |
| B. Non-personnel | \$0 | \$0 | \$0 | |
| 1. Initial start up | \$0 | \$0 | \$0 | |
| 2. One-time | \$0 | \$0 | \$0 | |
| 3. Annual | \$0 | \$0 | \$0 | |

List Will this item result in any revenues for the City? If Yes, please list amount and type.
Revenues:

| | |
|-----|-------------------------------------|
| NO | <input checked="" type="checkbox"/> |
| YES | <input type="checkbox"/> |

| | |
|-------------|--------|
| 1. One-time | \$0.00 |
| 2. Annual | \$0.00 |

Other Comments: There is no budgetary impact to the change.