## FISCAL IMPACT STATEMENT

DATE:	<u>August 1, 2022</u>
FROM (Department):	Health Department
POINT OF CONTACT: PHONE:	<u>Maritza Bond, Director of Health</u> <u>203-946-6978</u>

## **SUBMISSION ITEM (Title of Legislation):**

RESOLUTION AUTHORIZING THE MAYOR OF THE CITY OF NEW HAVEN TO APPLY FOR AND ACCEPT THE OVERDOSE DATA TO ACTION GRANT AWARD FROM THE QUINNIPIACK VALLEY HEALTH DISTRICT FROM SEPTEMBER 1, 2022 TO AUGUST 31, 2023.

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

					Capital/Line Item/Dept/ACT/OBJ		
А.	Personnel	General	Special	Bond	<u>Code</u>		
	1. Initial start	-up					
	2. One-time						
	3. Annual		\$84,205				
B.	Non-Personne	el					
	1. Initial start	-up					
	2. One-time						
	3. Annual		\$4,782				
<b>List of Revenues:</b> Will this item result in any revenues for the City? (If yes, please list amount and type). YES $\square$ / NO $\boxtimes$							
1. One-time							
2. Annual Maintenance and Utilities Charge(s):							

## **Other Comments:**