

# NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS FINANCIAL ACTION FORM-IMPACT FEE USAGE JUSTIFICATION

Department: OMB on behalf of Sheriff's Office

Date: 9-25-2023

Subject: Nassau County Sheriff's Office Vehicles

FINANCIAL ACTION REQUESTED and Purpose (Attached Documentation if Necessary):

Vehicles and auto equipment for new deputy and officer positions at the Sheriff's Office in order to meet capacity and population growth in Nassau County.

Request use of Law Enforcement Capital Impact Fees, in the amount of \$203,885, be transferred to the Sheriff for vehicle purchases.

IMPACT FUNDS AVAILABLE: 6I006521 = \$643,373.29

ACCOUNT NUMBER for source of payment: 6I210582-591910 SHERF

Marshall Eyerman  
Department Head Signature \*\*

9/5/2023

Date

Elizabeth Backe  
Growth Management Signature \*\*

9/5/2023

Date

Chris Lacambra  
Office of Management & Budget \*\*

9/5/2023

Date

[Signature]  
County Manager Signature \*\*

9/6/2023

Date

\*\* Reviewed and determined the accuracy of the underlying data

\*\*\* This item required for IMPACT FEE JUSTIFICATION or at the DIRECTION OF THE BOARD

COUNTY ATTORNEY action: APPROVED ☐ DISAPPROVE ☐

Comments:

Denise C. May  
County Attorney Signature

9/6/2023

Date

<u>Clerk of Court/Comptroller Action</u>	<u>Board of County Commissioners Action</u>
<p>APPROVED <input type="checkbox"/> DISAPPROVE <input type="checkbox"/></p> <p>Approved Amount \$ _____</p> <p>_____ Clerk of Court/Comptroller      Date</p>	<p>Final</p> <p>Approval <input type="checkbox"/> Disapproved <input type="checkbox"/></p> <p>_____ Chairman, Board of Commissioners      Date</p>

(FAF revised 4-6-11) Board ☐ Clerk ☐ Attorney ☐ Growth Mgt ☐ Department