

DEPARTMENT: Public Works

By:

Phone: 966-5356

RECOMMENDED ACTION AND JUSTIFICATION:

(Policy Item: Yes  No )

Public Works requests transfer of \$2,520 from General Fund Contingency to Facilities Maintenance to cover the cost of an Elevator Service Agreement and authorize the Public Works Director to execute the Agreement.

The elevator maintenance must be performed by personnel trained and qualified to work on elevators. County Facilities Maintenance does not have the tools or trained personnel for this work. Thyssen Dover Elevator performed the maintenance service during the warranty period on the Government Center building. The warranty maintenance contract has expired. The new contract is a five year maintenance contract which will cost \$2,520 this fiscal year and \$4,320 every year thereafter. This expense was overlooked in the budget process this year. This contract covers monthly maintenance service, minor repairs and major repairs. One typical service call for minor maintenance would cost approximately \$500 plus parts. One typical major repair would cost \$2,000. The first year of operation the elevator required five minor repairs and one major repair. The call out cost for this would have been approximately \$4,500.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

There has been no history of action on an elevator maintenance contract for this facility as it is a new facility and was previously covered under warranty.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

No action. Call for service when repair is required and perform no preventative maintenance which could cost more than the annual service contract.

COSTS: ( ) Not Applicable	
A. Budgeted current FY>	\$ 0
B. Total anticipated Costs>	\$ 2,520
C. Required additional funding>	\$
D. Internal transfers>	\$

COSTS: <input checked="" type="checkbox"/> 4/5th Vote Required	
A. Unanticipated revenues>	\$
B. Reserve for contingencies>	\$ 2,520
C. Source description: >	

Balance in Reserve Contingencies, If Approved:  
\$ ~~169,096~~ 168,446

SPECIAL INSTRUCTIONS:

List the attachments and number the pages consecutively:

1. Elevator Maintenance Contract
2. Budget Action Form

CLERK'S USE ONLY

Res. No.: 05-2 Ord. No.:

Vote - Ayes: 4 Noes:

Absent: Reilly 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

By: \_\_\_\_\_  
Deputy

ADMINISTRATIVE OFFICER'S RECOMMENDATION:

This item on agenda as:

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

Comment: \_\_\_\_\_

C.A.O. Initials: Jh

**BUDGET ACTION FORM**

FUND	DEPT/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0128	473-0413	Facilities Maint. Maint. Structure		2,520	
001	0104	414-1090	GENERAL CONTINGENCY			2,520
<b>TRANSFER BETWEEN FUNDS</b>						
<b>TOTAL</b>					2,520	2,520

ACTION REQUESTED: (Check all that apply)

- (x) 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 appropriations from one budget to another, or between categories within a budget unit;

JUSTIFICATION: See attached Board item.

DEPT HEAD SIGNATURE *[Signature]* DATE 12/22/99

APPROVED BY RES NO. 00-2 CLERK [Signature] DATE 1-4-00

**Facilities**

**AUDITOR'S USE ONLY**  
BA#