

LEE COUNTY BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY

BLUE SHEET NO: 20040101

1. REQUESTED MOTION:

ACTION REQUESTED: Authorize one (1) new full time Equipment Operator staff position to conduct duties within the newly constructed Transfer Station at the Waste To Energy facility. Approve transfer of funds from reserves in the amount of \$25,000 to fund remaining portion of FY 03-04 budget.

WHY ACTION IS NECESSARY: Board approval is required for new positions.

WHAT ACTION ACCOMPLISHES: Provides the Solid Waste Division with personnel necessary to perform operational duties at the WTE Transfer Station and allows for additional recycling activity.

2. DEPARTMENTAL CATEGORY: 08
COMMISSION DISTRICT #: CW

C8A

3. MEETING DATE:

02-17-2004

4. AGENDA:

- CONSENT
- ADMINISTRATIVE
- APPEALS
- PUBLIC
- WALK ON
- TIME REQUIRED:

5. REQUIREMENT/PURPOSE:

(Specify)

- STATUTE
- ORDINANCE
- ADMIN. CODE 3-6
- OTHER

6. REQUESTOR OF INFORMATION:

- A. COMMISSIONER:
- B. DEPARTMENT: Lee County-Public Works
- C. DIVISION/SECTION: Solid Waste Division
- BY: Lindsey Sampson, Solid Waste Director
- DATE:

Lindsey Sampson 1/27/04

7. BACKGROUND:

Board approved Construction of the Solid Waste Transfer Station on Buckingham Road (Contract # 2370) on April 1, 2003. The project is substantially complete and final completion will take place the middle of February 2004. Due to the increased volume of incoming municipal waste surpassing the capacity at the WTE it is necessary to transfer on a daily basis.

The requested Equipment Operator position will load approx. 1,000 tons of refuse per week onto the transfer trucks. The position will also provide manual separation of recyclable materials from the incoming refuse, operate equipment, and provide minor maintenance and upkeep of the Division's equipment and facilities.

Upon transfer from reserves, funds will be available in acct numbers:

OB5340840100.501210 (Solid Waste - Disposal - S.W. system ops - Salaries - full time) \$23,000
OB5340840100.505280 (Solid Waste - Disposal - S.W. system ops - Minor equipment) \$2,000

8. MANAGEMENT RECOMMENDATIONS:

9. RECOMMENDED APPROVAL

A DEPARTMENT DIRECTOR	B PURCH. OR CONTRACTS	C HUMAN RESOURCES	D OTHER	E COUNTY ATTORNEY	F BUDGET SERVICES				G COUNTY MANAGER
					OA	OM	Risk	GC	
<i>J. Smith</i> 1-29-04	N.A.	<i>Health</i> <i>Verney</i>		<i>S. J. [Signature]</i> 2/3/04		<i>Admin</i> 2/5/04	<i>08</i> 5/30/04	<i>1/23/04</i>	<i>J. Smith</i> 1-29-04

10. COMMISSION ACTION:

- APPROVED
- DENIED
- DEFERRED
- OTHER

Rec. by CoAtty
Date: 2/3/04
Time: 9:54 AM
Forwarded To: Admin 2/3/04 10:45

RECEIVED BY
COUNTY ADMIN: [Signature]
2/3/04
7:30 pm SGT
COUNTY ADMIN
FORWARDED TO: [Signature]
2/5/04
MUM

REQUEST FOR TRANSFER OF FUNDS

FUND NAME: Solid Waste DATE: 02/03/04 BATCH NO. _____

FISCAL YEAR: FY03/04 FUND #: 40100 DOC TYPE: YB LEDGER TYPE: BA

TO: Solid Waste Disposal Facilities
 (DIVISION NAME) (PROGRAM NAME)

NOTE: PLEASE LIST THE ACCOUNT NUMBER BELOW IN THE FOLLOWING ORDER:
 FUND #-DEPT/DIV #-PROGRAM #-OBJECT CODE #-SUBFUND #-PROJECT#-COST CENTER #.
 (EXAMPLE: BB5120100100.503450)

ACCOUNT NUMBER	OBJECT NAME	DEBIT
OB5340840100.501210	Salaries-Full-time Reg	\$ 23,000
OB5340840100.505280	Minor Equipment	2,000
	TOTAL TO:	\$ 25,000

FROM: Non-Departmental Solid Waste Reserves
 (DIVISION NAME) (PROGRAM NAME)

ACCOUNT NUMBER	OBJECT NAME	CREDIT
GC5890140100.509910	Reserve for Contingencies	\$ 25,000
	TOTAL FROM:	\$ 25,000

EXPLANATION: As approved by BOCC on 2/17/04 in Bluesheet #BS20040101.

<p>DIVISION DIRECTOR SIGNATURE _____ DATE _____</p> <p>DBS: APPROVAL <input checked="" type="checkbox"/> DENIAL _____</p> <p>APPROVAL <input checked="" type="checkbox"/> DENIAL _____</p> <p>CO. ADMIN.: APPROVAL _____ DENIAL _____</p> <p>BCC APPROVAL DATE _____</p>	<p>DEPARTMENT DIRECTOR SIGNATURE _____ DATE _____</p> <p><i>Pat Melles</i> _____ <u>2/3/04</u></p> <p>OPERATIONS ANALYST SIGNATURE _____ DATE _____</p> <p><i>du</i> _____ <u>2/4/04</u></p> <p>BUDGET OPERATIONS MANAGER SIGNATURE _____ DATE _____</p> <p>CO. ADMIN. SIGNATURE _____ DATE _____</p> <p>BCC CHAIRMAN SIGNATURE _____</p>
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BA NO: _____ AUTH CODE: _____ TRANS DATE: _____

REV. 05/93