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|---|---|
| <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected <input type="checkbox"/> Supplemental | 1999 Session LRB or Bill No. -- Adm. Rule No. SB-493 --LRB-4789/1 |
| FISCAL ESTIMATE DOA-2048 N(R10/94) | Amendment No. if Applicable |

Subject
LAMBEAU FIELD

Fiscal Effect

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation

| | |
|---|--|
| <input type="checkbox"/> Increase Existing Appropriation <input type="checkbox"/> Increase Existing Revenues <input type="checkbox"/> Decrease Existing Appropriation <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Create New Appropriation | <input type="checkbox"/> Increase Costs - May be possible to Absorb Within Agency's Budget <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Decrease Costs |
|---|--|

Local: No local government costs

| | | |
|--|--|--|
| 1. <input type="checkbox"/> Increase Costs <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory 2. <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | 3. <input type="checkbox"/> Increase Revenues <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory 4. <input type="checkbox"/> Decrease Revenues <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | 5. Types of Local Government Units Affected <input type="checkbox"/> Towns <input type="checkbox"/> Villages <input type="checkbox"/> Cities <input checked="" type="checkbox"/> Counties <input type="checkbox"/> Others <input type="checkbox"/> School Districts <input type="checkbox"/> WTCS Districts |
|--|--|--|

| | |
|---|---|
| Fund Sources Affected: <input checked="" type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S | Affected Ch. 20 Appropriations: 445(1)(a) |
|---|---|

Assumptions Used in Arriving at Fiscal Estimate

This bill impacts one county (Brown) and most likely will be used only once in the foreseeable future to renovate one stadium (Lambeau field).

The increased costs to the state will consist of those incurred issuing prevailing wage rates for this project and any subsequent investigation of complaints that various contracting businesses failed to pay those rates. The department anticipates the cost of issuing rates for this project at less than \$100 and expects no more than one complaint on the project alleging failure to pay one or more individuals properly. The department expects the complaint can be investigated for \$250. Overall the department believes it may absorb these anticipated costs.

The department anticipates the prevailing wage aspects of this legislation will have no fiscal impact on Brown County.

Long-Range Fiscal Implications

None.

| | | |
|---|---|-------------------------|
| Agency/Prepared by:(Name & Phone No.) DWD / Anderson, Bob 266-3345 | Authorized Signature/Telephone No. | Date 03/24/00 |
|---|---|-------------------------|

FISCAL ESTIMATE WORKSHEET

1999 Session

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|---|--|---------------------------------------|---|---------------|
| Detailed Estimate of Annual Fiscal Effect DOA-2047(R10/94) | <input checked="" type="checkbox"/> Original | <input type="checkbox"/> Updated | LRB or Bill No./Adm Rule No. SB-493 / LRB-4789/1 | Amendment No. |
| | <input type="checkbox"/> Corrected | <input type="checkbox"/> Supplemental | | |

Subject
LAMBEAU FIELD

I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):
None. The department will update its various publications to reflect passage of this legislation when the publications are normally reprinted.

| II. Annualized Costs: | Annualized Fiscal Impact on State funds from: | |
|--|---|------------------------|
| | Increased Costs | Decreased Costs |
| A. State Costs by Category | | |
| State Operations - Salaries and Fringes | \$0 | - \$0 |
| (FTE Position Changes) | (FTE) | (- FTE) |
| State Operations - Other Costs | \$0 | - \$0 |
| Local Assistance | \$0 | - \$0 |
| Aids to Individuals or Organizations | \$0 | - \$0 |
| TOTAL State Costs by Category | \$0 | - \$0 |
| B. State Costs by Source of Funds | Increased Costs | Decreased Costs |
| GPR | \$0 | - \$0 |
| FED | \$0 | - \$0 |
| PRO/PRS | \$0 | - \$0 |
| SEG/SEG-S | \$0 | - \$0 |
| III. State Revenues - Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.) | Increased Rev. | Decreased Rev. |
| GPR Taxes | \$0 | - \$0 |
| GPR Earned | \$0 | - \$0 |
| FED | \$0 | - \$0 |
| PRO/PRS | \$0 | - \$0 |
| SEG/SEG-S | \$0 | - \$0 |
| TOTAL State Revenues: | \$0 | - \$0 |

NET ANNUALIZED FISCAL IMPACT

| | | |
|-------------------------|--------------|--------------|
| | <u>STATE</u> | <u>LOCAL</u> |
| Net Change in Costs: | \$0 | \$0 |
| Net Change in Revenues: | \$0 | \$0 |

| | | |
|---|--|------------------|
| Agency/Prepared by:(Name & Phone No.) DWD / Anderson, Bob 266-3345 | Authorized Signature/Telephone No. | Date 03/24/00 |
|---|--|------------------|