

**FISCAL ESTIMATE WORKSHEET**  
 Detailed Estimate of Annual Fiscal Effect  
 DOA-2047(R06/99)

ORIGINAL  
 CORRECTED

UPDATED  
 SUPPLEMENTAL

LRB or Bill No./Adm. Rule No.      Amendment No.  
 Comm 5.30

**Subject**  
 Building Contractor Registration

**I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):**

<b>II. Annualized Costs:</b>	<b>Annualized Fiscal impact on State funds from:</b>	
	<b>Increased Costs</b>	<b>Decreased Costs</b>
<b>A. State Costs By Category</b>		
State Operations - Salaries and Fringes	\$ 0	\$ -
(FTE Position Changes)	( 0 FTE)	( FTE)
State Operations - Other Costs	0	-
Local Assistance	0	-
Aids to Individuals or Organizations	0	
<b>TOTAL State Costs By Category</b>	<b>\$</b>	<b>\$</b>
<b>B. State Costs By Source of Funds</b>	<b>Increased Costs</b>	<b>Decreased Costs</b>
GPR	\$ 0	\$ -
FED	0	-
PRO/PRS	0	-
SEG/SEG-S	0	-
<b>III. State Revenues- Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.)</b>	<b>Increased Rev.</b>	<b>Decreased Rev.</b>
GPR Taxes	\$ 0	\$ -
GPR Earned	0	-
FED	0	-
PRO/PRS	806,250	-
SEG/SEG-S	0	-
<b>TOTAL State Revenues</b>	<b>\$ 806,250</b>	<b>\$ -</b>

**NET ANNUALIZED FISCAL IMPACT**

STATE

LOCAL

<b>NET CHANGE IN COSTS</b>	\$ _____	\$ _____
	0	0
<b>NET CHANGE IN REVENUES</b>	\$ _____	\$ _____
	806,250	0

Agency/Prepared by: (Name & Phone No.)  
 Commerce/James Quast, 266-9292

Authorized Signature/Telephone No.

Date