

Levy County Board of County Commissioners Agenda Item Summary Form

1.	Name:	Mike West			
2.	Organization/Title/Telephone:	LCSO 911 Addressing / 911 Coordinator / 352-486-5214			
3.	Meeting Date:		Tuesday, April 6, 2021		
4.	Requested Motion/Action: Update status of grant application due to corrections				
5.	Agenda Presentation:	Yes ⊠	No □	N/A □	
6.	Time Requested: (Request will be granted if Possible	5 minutes e) allotted time not more than 15 minutes			
7.	Is this Item Budgeted (If Applicable):	Yes □	No ⊠	N/A □	
8.	If no, State Action Required:				
	a. Budget Action:	Will request budget amendment if/when grant is awarded			
	b. Financial Impact Summary Statement:				
	c. Detailed Analysis Attached				
	d. Budget Officer Approval:				
	If approved enter date: Click or tap to enter a date.				
9.	Background: (Why is the action necessary, and what action will be accomplished) (All supporting documentation must be attached if any)				
	Upon submission to the E911 Board it was brought to our attention that some figures on application were incorrect. The figures on this new copy of the application have been updated. This does not affect any terms of the grant.				
10.	. Recommended Approval				
	a. Department Director:	Yes □	No □	N/A □	
	b. County Attorney:	Yes □	No □	N/A □	
	c. County Coordinator:	Yes □	No □	N/A □	
	d. Other:	Yes □	No □	N/A □	