

Portland, Oregon  
**FINANCIAL IMPACT and PUBLIC INVOLVEMENT STATEMENT**  
**For Council Action Items**

(Deliver original to Financial Planning Division. Retain copy.)

1. Name of Initiator Yone Akagi		2. Telephone No. 3-7648	3. Bureau/Office/Dept. Water / Operations / Water Quality Compliance
4a. To be filed (date): June 13, 2013	4b. Calendar (Check One) Regular    Consent    4/5ths <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		5. Date Submitted to Commissioner's office and CBO Budget Analyst: June 5, 2013
6a. Financial Impact Section: <input checked="" type="checkbox"/> Financial impact section completed		6b. Public Involvement Section: <input checked="" type="checkbox"/> Public involvement section completed	

**1) Legislation Title:** Authorize an Intergovernmental Agreement with The Regents of the University of California for Laboratory Services for Cryptosporidium and Giardia Scat Analysis (Ordinance)

**2) Purpose of the Proposed Legislation:** The purpose is to authorize an Agreement with The Regents of the University of California to provide laboratory services to analyze scat samples for Cryptosporidium and Giardia.

On March 14, 2012, the Oregon Health Authority (OHA) issued its Final Order granting the City of Portland's request for a variance to the treatment requirements of the Long Term 2 Enhanced Surface Water Treatment Rule under 42 USC § 300g-4(a)(1)(B). The Bull Run Treatment Variance is subject to scat monitoring conditions specified by OHA in the Final Order, IV(1)(a)(D)(iii). In order to comply with this condition, the City must retain the services of a laboratory to test scat samples for the presence of Cryptosporidium oocysts. The Regents of the University of California, selected through a formal competitive request for proposals process, will provide the required laboratory services through its Western Institute for Food Safety and Security Laboratory. The scope of work for this agreement has been developed to meet the Water Bureau's compliance requirements for the Bull Run Treatment Variance, as well as additional work that may be needed to support the variance.

**3) Which area(s) of the city are affected by this Council item? (Check all that apply—areas are based on formal neighborhood coalition boundaries)?**

- |  |                                    |                                    |                                |
|--|------------------------------------|------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> City-wide/Regional | <input type="checkbox"/> Northeast | <input type="checkbox"/> Northwest | <input type="checkbox"/> North |
| <input type="checkbox"/> Central Northeast             | <input type="checkbox"/> Southeast | <input type="checkbox"/> Southwest | <input type="checkbox"/> East  |
| <input type="checkbox"/> Central City                  |                                    |                                    |                                |

**FINANCIAL IMPACT**

4) **Revenue:** Will this legislation generate or reduce current or future revenue coming to the City? If so, by how much? If so, please identify the source.

No.

5) **Expense:** What are the costs to the City as a result of this legislation? What is the source of funding for the expense? *(Please include costs in the current fiscal year as well as costs in future year, including Operations & Maintenance (O&M) costs, if known, and estimates, if not known. If the action is related to a grant or contract please include the local contribution or match required. If there is a project estimate, please identify the level of confidence.)*

The not-to-exceed value of this contract is \$200,000. Funding for the project has been requested in the FY 2013-14 Budget and will be requested in FY 2014-15 through FY 2016-17 Budgets.

6) **Staffing Requirements:**

- **Will any positions be created, eliminated or re-classified in the current year as a result of this legislation?** *(If new positions are created please include whether they will be part-time, full-time, limited term, or permanent positions. If the position is limited term please indicate the end of the term.)*

No.

- **Will positions be created or eliminated in future years as a result of this legislation?**

No.

*(Complete the following section only if an amendment to the budget is proposed.)*

7) **Change in Appropriations** *(If the accompanying ordinance amends the budget please reflect the dollar amount to be appropriated by this legislation. Include the appropriate cost elements that are to be loaded by accounting. Indicate "new" in Fund Center column if new center needs to be created. Use additional space if needed.)*

Fund	Fund Center	Commitment Item	Functional Area	Funded Program	Grant	Sponsored Program	Amount

**[Proceed to Public Involvement Section — REQUIRED as of July 1, 2011]**

PUBLIC INVOLVEMENT

**8) Was public involvement included in the development of this Council item (e.g. ordinance, resolution, or report)? Please check the appropriate box below:**

- YES: Please proceed to Question #9.  
 NO: Please, explain why below; and proceed to Question #10.

This Council item is intended to meet State regulatory requirements for maintaining a Bull Run Treatment Variance as specified by the Oregon Health Authority (OHA) in the Final Order (March 14, 2012) to the Portland Water Bureau's request for a variance to the treatment requirements of the Long-Term 2 Enhanced Surface Water Treatment Rule.

**9) If "YES," please answer the following questions:**

**a) What impacts are anticipated in the community from this proposed Council item?**

**b) Which community and business groups, under-represented groups, organizations, external government entities, and other interested parties were involved in this effort, and when and how were they involved?**

**c) How did public involvement shape the outcome of this Council item?**

**d) Who designed and implemented the public involvement related to this Council item?**

**e) Primary contact for more information on this public involvement process (name, title, phone, email):**

**10) Is any future public involvement anticipated or necessary for this Council item? Please describe why or why not.**

No. For the duration of the Bull Run Treatment Variance, the Water Bureau will be subject to the conditions specified by OHA in the Final Order.

David G. Shaff, Administrator

BUREAU DIRECTOR (Typed name and signature)