MILWAUKEE COUNTY FISCAL NOTE FORM

| DATE: | 6/2/2025 | Original Fiscal Note | \boxtimes | | |
|--|---------------------------------------|--------------------------|-------------|--|--|
| | | Substitute Fiscal Note | | | |
| SUBJECT: Request from the Director of the Office of Emergency Management (OEM) for adoption of the Milwaukee County Hazard Mitigation Plan. | | | | | |
| FISCAL EFFECT: | | | | | |
| No Direct County Fiscal Impact | | Increase Capital Expend | litures | | |
| | Existing Staff Time Required | | | | |
| | | Decrease Capital Exper | ditures | | |
| Increase Operating Expenditures | | | | | |
| (If ch | necked, check one of two boxes below) | Increase Capital Revenue | ies | | |
| | Absorbed Within Agency's Budget | Decrease Capital Reven | lues | | |
| | Not Absorbed Within Agency's Budget | | | | |
| | ase Operating Expenditures | Use of Contingent Funds | 3 | | |
| Increase Operating Revenues | | | | | |

Decrease Operating Revenues

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

| | Expenditure or Revenue Category | Current Year | Subsequent Year |
|---------------------|------------------------------------|--------------|-----------------|
| Operating Budget | Expenditure | 0 | 0 |
| | Revenue | 0 | 0 |
| | Net Cost | 0 | 0 |
| Capital Improvement | Expenditure | 0 | 0 |
| Budget | Revenue | 0 | 0 |
| | Net Cost | 0 | 0 |

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated.¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.
 - A. The Director of the Office of Emergency Management (OEM) is requesting adoption of the Milwaukee County Hazard Mitigation Plan. Adopting this plan allows municipal governments to adopt it for their jurisdiction, making Milwaukee County eligible to apply for pre- and postdisaster mitigation project dollars from FEMA. Adoption is necessary to comply with the Disaster Mitigation Act 2000 (DMA 2000) amendment of the Robert T. Stafford Disaster Relief and Emergency Assistance Act which states that the county is obligated to try to reduce any hazard that has received relief funding in the past. Upon adoption, this plan is valid for five years.
 - B. No direct costs are associated with the adoption of the 2025 Milwaukee County Hazard Mitigation plan. Adopting this plan is meant to reduce loss of life and property, human suffering, economic disruption, and disaster assistance costs. The implementation of this plan could save taxpayer and local government dollars by decreasing the amount of money needed to support post-disaster recovery efforts; i.e., making the jurisdiction eligible for FEMA monies.
 - C. There is no tax levy impact associated with approval of this request in 2025. Milwaukee County and its municipalities will not be eligible for FEMA Hazard Mitigation Grant Program (HMPG) monies with the adoption of this plan.
 - D. No assumptions are made.

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

² Community Business Development Partners' review is required on all professional service and public work construction contracts.

| Department/Prepared by: | Cassandra Libal, Director of OEM |
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|-------------------------|----------------------------------|

| Authorized Signature | | | | |
|-------------------------------|------------|----------------|--|--|
| Did DAS-Fiscal Staff Review? | 🛛 Yes | □ No | | |
| Did CBDP Review? ² | 🗆 Yes 🛛 No | ☑ Not Required | | |