**Financial Impact Assessment Appendix**

1. Does this submission require either of the following approvals under the *Finance Act*?

|  |  |
| --- | --- |
| Section 77 requires a report from the Minister of Finance and Treasury Board before entering into a net debt obligation. [ ]  Yes *(Attached)* | Section 78 requires Treasury and Policy Board approval before undertaking an operating obligation.[ ]  Yes *(Please explain in more detail below)* |
| Reason: |

1. Briefly describe the total operating financial and FTE request by completing the following table: *(Table amounts should be annual cumulative dollar requirements. Cumulative refers to the total amount for each fiscal year in excess of base budget for the current year. Gross expenses - prior to any recoveries or fees - should be used to complete this table.)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Initiative** | **Fiscal Year** | **Fiscal Year** | **Fiscal Year** | **Fiscal Year** |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
| *Less amount that will be funded through base budget*  | $ | $ | $ | $ |
| Total new operating funding required | $ |  | $ | $ |
| New FTE(s) |  |  |  |  |
| Salary/benefits associated with FTE(s) *(included above)* |  |  |  |  |

1. Briefly describe the total capital financial and FTE request by completing the following table: *(Table amounts should be annual cumulative $ requirements. Gross expenses - prior to any recoveries or fees - should be used to complete this table.) Please specify capitalized asset retirement costs separately in the chart.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Initiative** | **Fiscal Year** | **Fiscal Year** | **Fiscal Year** | **Fiscal Year** |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
| *Less amount that will be funded out of capital appropriation* | $ | $ | $ | $ |
| Total new capital funding required | $ | $ | $ | $ |
| New FTE(s) |  |  |  |  |
| Salary/benefits associated with FTE(s) *(included above)* |  |  |  |  |

1. If there is third party funding associated with this request, please describe source(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Table amounts should be annual cumulative $ requirements.)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Recoverable / Revenue** | **Fiscal Year** | **Fiscal Year** | **Fiscal Year** | **Fiscal Year** |
| Existing recoverable/revenue | $ | $ | $ | $ |
| New recoverable/revenue | $ | $ | $ | $ |
| Total recoverable/revenue  | $ | $ | $ | $ |
| New recoverable/ revenue FTE(s) |  |  |  |  |

1. Briefly outline the federal funding programs that have been explored as a possible funding source noting which ones have been applied for or confirm that federal funding is not available for this matter.
2. Does this affect a consolidated entity? If yes, has the financial impact been factored into the consolidated entity?
3. Provide any further comments on the financial impact that have not been covered above.

[Original signed by]

(Executive Director / Director of Finance) Date