Ordinance No. 9354

2017 Budget Proposal

Sanitary District of Hammond
Sewer Maintenance Fund 608 (8201)
Special Sanitary Debt Service Exempt Fund 308 (8284)
Special Sanitary Debt Service Fund 309 (8280)

SPONSORED BY: COUNCILMAN ROBERT A. MARKOVICH COUNCILWOMAN JANET VENECZ

CURRENT YEAR FINANCIAL WORKSHEET

(Formerly Line 2 Worksheet)

Selected Year: 2017

Selected County: 45 - Lake County

Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8201 - SPECIAL SANITARY GENERAL

1. Current Year Approved Budget	\$3,279,868
2. Encumbrances Brought Forward	\$85,967
Changes to Appropriations: a) Additional Appropriations (January to June)	\$0
b) Reductions January through June	\$0
4. Other Non-Appropriated Obligations	\$0
5. Total Approved Appropriations	\$3,365,835
DISBURSEMENTS	
6. January through June Current Year Disbursements	\$1,488,769
7. Appropriation Balance	\$1,877,066
8. Reductions July through December	\$0
9. Estimated Current Year Expenditures July through December	\$1,877,066
Line 3	
10. Proposed/Approved Additional Appropriations for July through Dec. of Current Year	\$0
Line 4A	
11. Levy excess not transferred prior to June 30	\$0
12. Temporary Loans outstanding as of June 30	\$998,700
What fund loaned the cash on Line 12:	TAX ANTICIPATION WARRANT
13. Temporary loans not included in Lines 2 or 3	\$998,700
Line:4B	
14. Temp loans to be repaid in the first six months of ensuing year	\$0
What fund loaned the cash on Line 14:	
Line:6	
15. June 30 Cash Balance, including investments	\$853,628
Line 7	
16. Taxes to be collected, present year (December settlement)	\$973,298

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į	hereby acknowledge that the submission of this document through the Gateway password and PIN system constitutes an "electronic signature" as defined in IC 5-24-2-2. This submission is intended to, and hereby does, constitute authentication and approval of the submitted document as required by the indicate the submitted document as required by the indicate the submitted document as required by the indicate the submitted document as required by the
f	tolana Code. I understand that this electronic signature takes the place of my handwritten signature and accomplishes the same purposes as would my andwritten signature in the same force and effect as my handwritten and and will be used for all lawful purposes. I affirm that I have the real and apparent authority to electronically sign and submit this document in behalf of the unit.

Prescribed by the Department of Local Government Finance Approved by the State Board of Accounts

Budget Form 1 - Budget Estimate Year: 2017 County: Lake Unit: Hammond Sanitary

Fund	Department	Category	Sub-Category	Line Item Code	Line Item	Published	Adopted
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Salaries and Wages	411.01	Salaries and Wages	\$977,394	\$977,394
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Salaries and Wages	411.02	Overtime Salaries	\$50,000	\$50,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	413.01	FICA	\$78,596	\$78,596
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	413.02	PERF	\$145,890	\$145,890
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	413.04	Insurance (ife/health/w.c./u)	\$437,555	\$437,555
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	413.06	Clothing Allowance	\$5,000	\$5,000
					PERSONAL SERVICES Total	\$1,694,435	\$1,694,435
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SUPPLIES	Office Supplies	421,00	Office Supplies	\$10,000	\$10,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SUPPLIES	Operating Supplies	422.00	Operating Supplies	\$100,000	\$100,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SUPPLIES	Repair and Maintenance Supplies	423.00	Repair - Maintenance Supplies	\$150,000	\$150,000
					SUPPLIES Total	\$260,000	\$260,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Professional Services	431.00	Professional Services	\$1,500,000	\$1,500,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Communication and Transportation	432.00	Communication - Transportation	\$5,000	\$5,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Insurance	434.00	Insurance	\$65,350	\$65,350

Prescribed by the Department of Local Government Finance Approved by the State Board of Accounts

Fund	Department	Category	Sub-Category	Line Item Code	Line Item	Published	Adopted
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Utility Services	435.00	Utilities	\$65,000	\$65,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Repairs and Maintenance 436.00	436.00	Repairs - Maintenance	\$75,000	\$75,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Rentals	437.00	Rentals	\$15,000	\$15,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges	439.00	Other Services - Charges	\$30,000	\$30,000
The state of the s					SERVICES AND CHARGES Total	\$1,755,350	\$1,755,350
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	CAPITAL OUTLAYS	Machinery, Equipment, and Vehicles	440.00	CAPITAL OUTLAY	\$75,000	\$75,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	CAPITAL OUTLAYS	Machinery, Equipment, and Vehicles	449.00	LEASE PURCHASE	\$170,000	\$170,000
		The state of the s	The state of the s		CAPITAL OUTLAYS Total	\$245,000	\$245,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	DEBT SERVICE	Payments on Tax Anticipation Warrants Interest	438.02	INTEREST	\$15,000	\$15,000
		A CONTRACTOR OF THE PARTY OF TH			DEBT SERVICE Total	\$15,000	\$15,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PROPERTY TAX CAP	Property Tax Cap Impact		Property Tax Cap Impact	\$800,000	\$900,000
					PROPERTY TAX CAP Total	\$900,000	\$900,000
					NO DEPARTMENT Total	\$4,869.785	\$4,869.785
				TOTAL 8201 - SPEC	TOTAL 8201 - SPECIAL SANITARY GENERAL FUND	\$4,869,785	\$4,869,785

Budget Form 2 - Estimate of Miscellaneous Revenue Year: 2017 County: Lake Unit: 0810 - Hammond Sanitary

Fund: 8201 - SPECIAL SAN	SPECIAL SANITARY GENERAL		
Revenue Code Revenue Nam	Revenue Name	July 1 - December 31, 2016	January 1 - December 31, 2017
R112	Financial Institution Tax distribution	\$10,131	\$11,199
R114	Motor Vehicle/Aircraft Excise Tax Distribution	\$56,824	\$116,618
R135	Commercial Vehicle Excise Tax Distribution	\$8,506	\$18,805
	(CVET)	Co	\$40 000
R906	Refunds and Reimbursements	De	00000
R910	Transfers In - Transferred from Another Fund	0\$	\$1,500,000
R913	Other Receipts	\$1,427,420	\$30,000
Charles and the state of the st	SPECIAL SANITARY GENERAL Total	\$1,502,881	\$1,716,622

BUDGET REPORT FOR

Selected Year: 2017

Selected County: 45 - Lake County

Selected Unit: 0810 - HAMMOND SANITARY

Selected Fund: 8201 - SPECIAL SANITARY GENERAL

	Advertised Amount	Adopted Amount
PERSONAL SERVICES	\$1,694,435	\$1,694,435
SUPPLIES	\$260,000	\$260,000
SERVICES AND CHARGES	\$1,755,350	\$1,755,350
CAPITAL OUTLAY	\$245,000	\$245,000
DEBT SERVICE	\$15,000	\$15,000
PROPERTY TAX CAPS	\$900,000	\$900,000
Total Application	\$4,869,785	\$4,869,785

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I hereby acknowledge that the submission of this document through the Gateway password and PIN system constitutes an "electronic signature" as defined in IC 5-24-2-2. This submission is intended to, and hereby does, constitute authentication and approval of the submitted document as required by the Indiana Code. I understand that this electronic signature takes the place of my handwritten signature and accomplishes the same purposes as would my handwritten signature in the same circumstance. I further acknowledge that this electronic signature has the same force and effect as my handwritten signature and can and will be used for all lawful purposes. I affirm that I have the real and apparent authority to electronically sign and submit this document on behalf of the unit.

Budget Estimate- Financial Statement-Proposed Tax Rate

Taxing Unit: 0810 - HAMMOND SANITARY
Fund Name: 8201 - SPECIAL SANITARY GENERAL
County: 45 - Lake County

Year: 2017

Net Assessed Value	\$3,123,4	65,570
Funds Required For Expenses To December 31st Of Incoming Year	Amount Used To Compute Published Budget	Appropriating Body
Total budget estimate for incoming year	\$4,869,785	\$4,869,785
Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	\$1,877,066	\$1,877,066
3. Additional appropriation necessary to be made July 1 to December 31 of present year	\$0	\$0
4. Outstanding temporary loans: a). To be paid not included in lines 2 or 3	\$998,700	\$998,700
b). Not repaid by December 31 of present year	\$0	\$0
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	\$7,745,551	\$7,745,551
Funds On Hand To Be Received From Sources Other Than Proposed Tax Levy	Amount Used To Compute Published Budget	Appropriating Body
6. Actual cash balance, June 30 of present year (including cash investments)	\$853,628	\$853,628
7. Taxes to be collected, present year (December settlement)	\$973,298	\$973,298
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year (Schedule on File): a). Total Column A Budget Form 2	\$1,502,881	\$1,502,881
b). Total Column B Budget Form 2	\$1,716,622	\$1,716,622
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	\$5,046,429	\$5,046,429
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	\$2,699,122	\$2,699,122

Proposed Tax Rate and Levy	Amount Used To Compute Published Budget	Appropriating Body
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	\$580,703	\$580,703
12. Amount to be raised by tax levy (add lines 10 and 11)	\$3,279,825	\$3,279,825
13a. Property Tax Replacement Credit from Local Option Tax	\$0	\$0
13b. Operating LOIT	\$0	\$0
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13a and 13b from line 12)	\$3,279,825	\$3,279,825
15. Levy Excess Fund applied to current budget	\$0	\$0
16. Net amount to be raised	\$3,279,825	\$3,279,825
17. Net Tax Rate on each one hundred dollars of taxable property	0.1050	0.1050
Property Tax Caps	Amount Used To Compute Published Budget	Appropriating Body
Property Tax Cap Impact	\$900,000	\$900,000

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handwritten signature in the same circumstance. I further acknowledge	e of my handwritten signature and accomplishes the same purposes as would my that this electronic signature has the same force and effect as my handwritten
signature and can and will be used for all lawful purposes. I affirm that on behalf of the unit.	have the real and apparent authority to electronically sign and submit this document

CURRENT YEAR FINANCIAL WORKSHEET

(Formerly Line 2 Worksheet)

Selected Year: 2017

Selected County: 45 - Lake County

Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8280 - SPECIAL SANITARY DEBT SERVICE

APPROPRIATIONS	
1. Current Year Approved Budget	\$4,619,865
2. Encumbrances Brought Forward	\$0
Changes to Appropriations: a) Additional Appropriations (January to June)	\$0
b) Reductions January through June	\$0
4. Other Non-Appropriated Obligations	\$0
5. Total Approved Appropriations	\$4,619,865
DISBURSEMENTS	
6. January through June Current Year Disbursements	\$2,148,533
7. Appropriation Balance	\$2,471,332
8. Reductions July through December	\$0
Estimated Current Year Expenditures July through December	\$2,471,332
*Line3****	
10. Proposed/Approved Additional Appropriations for July through Dec. of Current Year	\$0
Line 4A	
11. Levy excess not transferred prior to June 30	\$0
12. Temporary Loans outstanding as of June 30	\$0
What fund loaned the cash on Line 12:	
13. Temporary loans not included in Lines 2 or 3	\$(
Mine 4B)	
14. Temp loans to be repaid in the first six months of ensuing year	\$
What fund loaned the cash on Line 14:	
Line 6	
15. June 30 Cash Balance, including investments	\$1,629,34
Line 7	
16. Taxes to be collected, present year (December settlement)	\$2,446,39

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DEBT WORKSHEET

Selected Year: 2017

Selected County: 45 - Lake County

Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8280 - SPECIAL SANITARY DEBT SERVICE

Name of Issue	Line 2 Due	Line 2 Amount	Line 1 Due	Line 1 Amount	Line 11A Line 11A Due Amount	Line 11A Amount	Line 11B Due	Line 11B Amount
Special Taxing District Bond Series 2015C	7/15/2016	\$324,544	7/15/2017	\$653,976	1/15/2018	\$329,248	7/15/2018	\$327,432
Special Taxing District Bonds Series 2010A	7/15/2016	\$367,715	7/15/2017	\$731,625	1/15/2018	\$368,620	7/15/2018	\$364,130
Special Taxing District Loan Series 2013A	7/15/2016	\$1,779,408	7/15/2017	\$3,553,540	1/15/2018	\$1,773,736	7/15/2018	\$1,773,160
Anticipated Debt Service		0\$		\$6,500		0\$		\$0
TOTALS BY FUND		\$2,471,667		\$4,945,641		\$2,471,604		\$2,464,722

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Budget Form 1 - Budget Estimate Year: 2017 County: Lake Unit: Hammond Sanitary

Fund	Department	Category	Sub-Category	Line Item Code	Line Item	Published	Adopted
8280 - SPECIAL SANITARY DEBT SERVICE	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges	438.04	Trustee Fees	\$3,150	\$3,150
					SERVICES AND CHARGES Total	\$3,150	\$3,150
8280 - SPECIAL SANITARY DEBT SERVICE	NO DEPARTMENT	DEBT SERVICE	Payments on Tax Anticipation Warrants Interest	438.03	TAW INTEREST	\$6,500	\$6,500
8280 - SPECIAL SANITARY DEBT SERVICE	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Principal	438.01	PRINCIPAL	\$3,210,000	\$3,210,000
8280 - SPECIAL SANITARY DEBT SERVICE	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Interest	438.02	INTEREST	\$1,725,991	\$1,725,991
					DEBT SERVICE Total	\$4,942,491	\$4,942,491
					NO DEPARTMENT Total	\$4,945,641	\$4,945,641
	Address and the second						
				TOTAL 8280 - SPECIAL	TOTAL 8280 - SPECIAL SANITARY DEBT SERVICE FUND	\$4,945,641	\$4,945,641

Budget Form 2 - Estimate of Miscellaneous Revenue Year: 2017 County: Lake Unit: 0810 - Hammond Sanitary

Fund: 8280 - SPECIAL SAN	PECIAL SANITARY DEBT SERVICE		
Revenue Code Revenue Nam	Revenue Name	July 1 - December 31, 2016	January 1 - December 31, 2017
R112	Financial Institution Tax distribution	\$15,803	\$17,846
R114	Motor Vehicle/Aircraft Excise Tax Distribution	\$88,643	\$185,843
R135	Commercial Vehicle Excise Tax Distribution (CVET)	\$13,269	\$29,968
R913	Other Receipts	0\$	0\$
	SPECIAL SANITARY DEBT SERVICE Total	\$117,715	\$233,657

BUDGET REPORT FOR

Selected Year: 2017

on behalf of the unit.

Selected County: 45 - Lake County

Selected Unit: 0810 - HAMMOND SANITARY

Selected Fund: 8280 - SPECIAL SANITARY DEBT SERVICE

	Advertised Amount	Adopted Amount
PERSONAL SERVICES	\$0	\$0
SUPPLIES	\$0	\$0
SERVICES AND CHARGES	\$3,150	\$3,150
CAPITAL OUTLAY	\$0	\$0
DEBT SERVICE	\$4,942,491	\$4,942,491
PROPERTY TAX CAPS	\$0	\$0
Total	\$4,945,641	\$4,945,641

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Budget Estimate- Financial Statement-Proposed Tax Rate

Taxing Unit: 0810 - HAMMOND SANITARY
Fund Name: 8280 - SPECIAL SANITARY DEBT SERVICE
County: 45 - Lake County

Year: 2017

Net Assessed Value	\$3,123,4	65,570
Funds Required For Expenses To December 31st Of Incoming Year	Amount Used To Compute Published Budget	Appropriating Body
Total budget estimate for incoming year	\$4,945,641	\$4,945,641
Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	\$2,471,667	\$2,471,667
3. Additional appropriation necessary to be made July 1 to December 31 of present year	\$0	\$0
4. Outstanding temporary loans: a). To be paid not included in lines 2 or 3	\$0	\$0
b). Not repaid by December 31 of present year	\$0	\$0
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	\$7,417,308	\$7,417,308
Funds On Hand To Be Received From Sources Other Than Proposed Tax Levy	Amount Used To Compute Published Budget	Appropriating Body
6. Actual cash balance, June 30 of present year (including cash investments)	\$1,629,348	\$1,629,348
7. Taxes to be collected, present year (December settlement)	\$2,446,392	\$2,446,392
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year (Schedule on File): a). Total Column A Budget Form 2	\$117,715	\$117,715
b). Total Column B Budget Form 2	\$233,657	\$233,657
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	\$4,427,112	\$4,427,112
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	\$2,990,196	\$2,990,196

Proposed Tax Rate and Levy	Amount Used To Compute Published Budget	Appropriating Body
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	\$2,471,604	\$2,471,604
12. Amount to be raised by tax levy (add lines 10 and 11)	\$5,461,800	\$5,461,800
13a. Property Tax Replacement Credit from Local Option Tax	\$0	\$0
13b. Operating LOIT	\$0	\$0
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13a and 13b from line 12)	\$5,461,800	\$5,461,800
15. Levy Excess Fund applied to current budget	\$0	\$0
16. Net amount to be raised	\$5,461,800	\$5,461,800
17. Net Tax Rate on each one hundred dollars of taxable property	0.1749	0.1749
Property Tax Caps	Amount Used To Compute Published Budget	Appropriating Body
Property Tax Cap Impact	\$0	\$0

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CURRENT YEAR FINANCIAL WORKSHEET

(Formerly Line 2 Worksheet)

Selected Year: 2017

Selected County: 45 - Lake County

Selected Unit: 0810 - HAMMOND SANITARY

Selected Fund: 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS

. Current Year Approved Budget	\$3,652,307
. Encumbrances Brought Forward	\$0
. Changes to Appropriations: a) Additional Appropriations (January to June)	\$0
b) Reductions January through June	\$0
. Other Non-Appropriated Obligations	\$0
. Total Approved Appropriations	\$3,652,307
ISBURSEMENTS	
. January through June Current Year Disbursements	\$2,707,705
. Appropriation Balance	\$944,602
. Reductions July through December	\$0
. Estimated Current Year Expenditures July through December	\$944,602
ine 3	
Proposed/Approved Additional Appropriations for July through Dec. of Current Year	\$0
ine 4A	
Levy excess not transferred prior to June 30	\$0
2. Temporary Loans outstanding as of June 30	\$521,500
What fund loaned the cash on Line 12: TAX ANTIC	PATION WARRANT
2. Transport leads at his closed in Lines 2. and	\$521,500
3. Temporary loans not included in Lines 2 or 3	
3. Temporary loans not included in Lines 2 or 3 ine 4B	
The property of the property o	\$0
ine 4B	\$0
ine 4B 4. Temp loans to be repaid in the first six months of ensuing year	\$0
ine 4B 4. Temp loans to be repaid in the first six months of ensuing year What fund loaned the cash on Line 14:	
ine 4B 4. Temp loans to be repaid in the first six months of ensuing year What fund loaned the cash on Line 14: ine 6	\$0 \$2,367,064

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DEBT WORKSHEET

Selected Year:

45 - Lake County Selected County:

0810 - HAMMOND SANITARY 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS Selected Unit: Selected Fund:

						8		
Name of Issue	Line 2 Due	Line 2 Amount	Line 1 Due	Line 1 Amount	Line 11A Due	Line 11A Amount	Line 11B Due	Line 11B Amount
Special Taxing District Bonds Series 2007B	7/15/2016	\$809,194	7/15/2017	\$1,627,649	1/15/2018	\$812,937	7/15/2018	\$817,070
Special Taxing District Refunding Bonds Series 2014	7/15/2016	\$111,938	7/15/2017	\$1,889,063	1/15/2018	\$1,812,125	7/15/2018	\$69,375
Special Taxing District Bonds Series 2006A	7/15/2016	\$23,270	7/15/2017	\$154,571	1/15/2018	\$136,301	7/15/2018	\$19,243
Anticipated Debt Service		\$6,465		\$10,000		\$0		\$0
TOTALS BY FUND		\$950,867		\$3,681,283		\$2,761,363		\$905,688

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Budget Form 1 - Budget Estimate Year: 2017 County: Lake Unit: Hammond Sanitary

Fund	Department	Category	Sub-Category	Line Item Code	Line Item	Published	Adopted
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges	438.04	Trustee Fees	\$1,250	\$1,250
4					SERVICES AND CHARGES Total	\$1,250	\$1,250
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	NO DEPARTMENT	DEBT SERVICE	Payments on Tax Anticipation Warrants Interest	438.03	TAW INTEREST	\$10,000	\$10,000
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Principal	438.01	PRINCIPAL	\$2,815,000	\$2,815,000
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Interest	438.01	INTEREST	\$855,033	\$855,033
					DEBT SERVICE Total NO DEPARTMENT Total	\$3,681,283 \$3,681,283	\$3,680,033 \$3,6811,283
		TOTAL 8	3284 - SPECIAL SANITARY	/ DEBT SERVICE EXEMPT F	TOTAL 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS FUND	\$3,681,283	\$3,681,283

Budget Form 2 - Estimate of Miscellaneous Revenue Year: 2017 County: Lake Unit: 0810 - Hammond Sanitary

Fund: 8284 - SPECIAL SA EXEMPT FROM CIRCUIT	Fund: 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS		
Revenue Code Revenue N	Revenue Name	July 1 - December 31, 2016	January 1 - December 31, 2017
R112	Financial Institution Tax distribution	\$11,864	\$8,753
R114	Motor Vehicle/Aircraft Excise Tax Distribution	\$66,548	\$91,155
R135	Commercial Vehicle Excise Tax Distribution (CVET)	\$9,961	\$14,699
R913	Other Receipts	0\$	0\$
SPECIAL SANIT	SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS Total	\$88,373	\$114,607

BUDGET REPORT FOR

Selected Year: 2017

35 78 40

Selected County: 45 - Lake County

Selected Unit: 0810 - HAMMOND SANITARY

Selected Fund: 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS

i projekti na sveti se nastava i se	Advertised Amount	Adopted Amount	
PERSONAL SERVICES	\$0	\$0	
SUPPLIES	\$0	\$0	
SERVICES AND CHARGES	\$1,250	\$1,250	
CAPITAL OUTLAY	\$0	\$0	
DEBT SERVICE	\$3,680,033	\$3,680,033	
PROPERTY TAX CAPS	\$0	\$0	
Total	\$3,681,283	\$3,681(283	

Form Signature		
TITLE		
SIGNATURE/PIN		
DATE		

I hereby acknowledge that the submission of this document through the Gateway password and PIN system constitutes an "electronic signature" as defined in IC 5-24-2-2. This submission is intended to, and hereby does, constitute authentication and approval of the submitted document as required by the Indiana Code. I understand that this electronic signature takes the place of my handwritten signature and accomplishes the same purposes as would my handwritten signature in the same circumstance. I further acknowledge that this electronic signature has the same force and effect as my handwritten signature and can and will be used for all lawful purposes. I affirm that I have the real and apparent authority to electronically sign and submit this document on behalf of the unit.

Budget Estimate- Financial Statement-Proposed Tax Rate

Taxing Unit: 0810 - HAMMOND SANITARY
Fund Name: 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS

County: 45 - Lake County

Year: 2017

Net Assessed Value	\$3,123,4	65,570
Funds Required For Expenses To December 31st Of Incoming Year	Amount Used To Compute Published Budget	Appropriating Body
Total budget estimate for incoming year	\$3,681,283	\$3,681,283
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	\$950,867	\$950,867
3. Additional appropriation necessary to be made July 1 to December 31 of present year	\$0	\$0
4. Outstanding temporary loans: a). To be paid not included in lines 2 or 3	\$521,500	\$521,500
b). Not repaid by December 31 of present year	\$0	\$0
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	\$5,153,650	\$5,153,650
Funds On Hand To Be Received From Sources Other Than Proposed Tax Levy	Amount Used To Compute Published Budget	Appropriating Body
6. Actual cash balance, June 30 of present year (including cash investments)	\$2,367,064	\$2,367,064
7. Taxes to be collected, present year (December settlement)	\$1,836,776	\$1,836,776
Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year (Schedule on File): a). Total Column A Budget Form 2	\$88,373	\$88,373
b). Total Column B Budget Form 2	\$114,607	\$114,607
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	\$4,406,820	\$4,406,820
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	\$746,830	\$746,830
Proposed Tax Rate and Levy	Amount Used To Compute	Appropriating Body

Proposed Tax Rate and Levy	Amount Used To Compute Published Budget	Appropriating Body
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	\$2,761,363	\$2,761,363
12. Amount to be raised by tax levy (add lines 10 and 11)	\$3,508,193	\$3,508,193
13a. Property Tax Replacement Credit from Local Option Tax	\$0	\$0
13b. Operating LOIT	\$0	\$0
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13a and 13b from line 12)	\$3,508,193	\$3,508,193
15. Levy Excess Fund applied to current budget	\$0	\$0
16. Net amount to be raised	\$3,508,193	\$3,508,193
17. Net Tax Rate on each one hundred dollars of taxable property	0.1123	0.1123
Property Tax Caps	Amount Used To Compute Published Budget	Appropriating Body
Property Tax Cap Impact	\$0	\$0

	Form Signature NAME
	TITLE
	SIGNATURE/PIN
	DATE
in In ha	nereby acknowledge that the submission of this document through the Gateway password and PIN system constitutes an "electronic signature" as defined IC 5-24-2-2. This submission is intended to, and hereby does, constitute authentication and approval of the submitted document as required by the diana Code. I understand that this electronic signature takes the place of my handwritten signature and accomplishes the same purposes as would my andwritten signature in the same circumstance. I further acknowledge that this electronic signature has the same force and effect as my handwritten gnature and can and will be used for all lawful purposes. I affirm that I have the real and apparent authority to electronically sign and submit this document in behalf of the unit.

NOTICE TO TAXPAYERS

The Notice to Taxpayers is available online at www.budgetnotices.in.gov or by calling (888) 739-9826.

Complete details of budget estimates by fund and/or department may be seen by visiting the office of this unit of government at **HAMMOND SANITARY DISTRICT.**

Notice is hereby given to taxpayers of HAMMOND SANITARY, Lake County, Indiana that the proper officers of HAMMOND CITY COUNCIL will conduct a public hearing on the year 2017 budget. Following this meeting, any ten or more taxpayers may object to a budget, tax rate, or tax levy by filing an objection petition with the proper officers of HAMMOND CITY COUNCIL not more than seven days after the hearing. The objection petition must identify the provisions of the budget, tax rate, or tax levy to which taxpayers object. If a petition is filed, HAMMOND CITY COUNCIL shall adopt with the budget a finding concerning the objections in the petition and testimony presented. Following the aforementioned hearing, the proper officers of HAMMOND CITY COUNCIL will meet to adopt the following budget:

Public Hearing Date	Tuesday, October 11, 2016
Public Hearing Time	6:00 PM
Public Hearing Location	HAMMOND CITY COUNCIL CHAMBERS 5925 CALUMET AVE 2ND FLOOR HAMMOND, IN 46320

Estimated Civil Max Levy	\$3,279,825
Property Tax Cap Credit Estimate	\$1,775,089

Adoption Meeting Date	Monday, October 24, 2016
Adoption Meeting Time	6:00 PM
Adoption Meeting Location	HAMMOND CITY COUNCIL CHAMBERS 5925 CALUMET AVE 2ND FLOOR HAMMOND, IN 46320

1 FundiName	2 Budget Estimate	3 Maximum:Estimated Funds to be Raised (including appeals and levies exempt from maximum levy limitations)	4 Excessive Levy Appeals	5 Current Tax Levy
8201-SPECIAL SANITARY GENERAL	\$3,969,785	\$3,279,825	\$0	\$3,156,538
8280-SPECIAL SANITARY DEBT SERVICE	\$4,945,641	\$5,461,800	\$0	\$4,924,052
8284-SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	\$3,681,283	\$3,508,193	\$0	\$3,696,713
Totals	\$12,596,709	\$12,249,818	\$0	\$11,777,303

ORDINANCE OR RESOLUTION FOR APPROPRIATIONS AND TAX RATES

State Form 55865 (7-15)
Approved by the State Board of Accounts, 2015
Prescribed by the Department of Local Government Finance

Budget Form No. 4

Ordinance Number: 9354

Be it ordained/resolved by the Hammond City Council that for the expenses of HAMMOND SANITARY for the year ending December 31, 2017 the sums herein specified are hereby appropriated and ordered set apart out of the several funds herein named and for the purposes herein specified, subject to the laws governing the same. Such sums herein appropriated shall be held to include all expenditures authorized to be made during the year, unless otherwise expressly stipulated and provided for by law. In addition, for the purposes of raising revenue to meet the necessary expenses of HAMMOND SANITARY, the property tax levies and property tax rates as herein specified are included herein. Budget Form 4-B for all funds must be completed and submitted in the manner prescribed by the Department of Local Government Finance.

This ordinance/resolution shall be in full force and effect from and after its passage and approval by the **Hammond City Council**.

Name of Adopting Entity / Fiscal Body	Type of Adopting Entity / Fiscal Body i	Date of Adoption
Hammond City Council	Common Council and Mayor	10/24/2016

Fund Code	Fund Name	Adopted Budget	Adopted Tax Levy	Adopted Tax Rate
8201	SPECIAL SANITARY GENERAL	\$3,969,785	\$3,279,825	0.1050
8280	SPECIAL SANITARY DEBT SERVICE	\$4,945,641	\$5,461,800	0.1749
8284	SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	\$3,681,283	\$3,508,193	0.1123
		\$12,596,709	\$12,249,818	0.3922

ORDINANCE OR RESOLUTION FOR APPROPRIATIONS AND TAX RATES

State Form 55865 (7-15)
Approved by the State Board of Accounts, 2015
Prescribed by the Department of Local Government Finance

Name

Budget Form No. 4

10/26/16

Signature

JANET VENECZ	Aye ⊠ Nay ☐ Abstain ☐	Janet Venecz /s/
MARK KALWINSKI	Aye ⊠ Nay □ Abstain □	Mark Kalwinski /s/
PETE TORRES	Aye 🔀 Nay 🗀 Abstain 🗖	Pete Torres /s/
ANTHONY W. HIGGS	Aye 🔯 Nay 🗀 Abstain 🗀	Anthony W. Higgs /s/
WILLIAM EMERSON	Aye ☑ Nay ☐ Abstain ☐	William Emerson /s/
DAVE C. WOERPEL	Aye ⊠ Nay ☐ Abstain ☐	Dave C. Woerpel /s/
SCOTT RAKOS	Aye ⊠ Nay □ Abstain □	Scott Rakos /s/
ROBERT A. MARKOVICH	Aye ⊠ Nay ☐ Abstain ☐	Robert A. Markovich /s/
DANIEL SPITALE	Aye ⊠ Nay □ Abstain □	Daniel Spitale /s/
Name	Title	Signature
ROBERT J. GOLEC City Clerk		Robert J. Golec /s/
	1	
Name)		: Signature Date

Thomas M. McDermott, Jr. /s/

Approve X

Veto

THOMAS M. MCDERMOTT