

Ordinance No. 9418

2019 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:

COUNCILWOMAN JANET VENECZ

COUNCILMAN ROBERT A. MARKOVICH

COUNCILMAN DANIEL SPITALE

CURRENT YEAR FINANCIAL WORKSHEET

(Formerly Line 2 Worksheet)

Selected Year: 2019
Selected County: 45 - Lake County
Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8201 - SPECIAL SANITARY GENERAL

Line 2

APPROPRIATIONS

1. Current Year Approved Budget	\$4,177,020
2. Encumbrances Brought Forward	\$580,925
3. 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	\$4,757,945

DISBURSEMENTS

6. January through June Current Year Disbursements	\$1,643,075
7. Appropriation Balance	\$3,114,870
8. Reductions July through December	\$0
9. Estimated Current Year Expenditures July through December	\$3,114,870

Line 3

10. Proposed/Approved Additional Appropriations for July through Dec. of Current Year	\$0
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Line 4A

11. Levy excess not transferred prior to June 30	\$0
12. Temporary Loans outstanding as of June 30	\$776,000
What fund loaned the cash on Line 12:	TAW
13. Temporary loans not included in Lines 2 or 3	\$776,000

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	\$2,237,927
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Line 7

16. Taxes to be collected, present year (December settlement)	\$1,006,923
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CURRENT YEAR FINANCIAL WORKSHEET

(Formerly Line 2 Worksheet)

Selected Year: 2019
Selected County: 45 - Lake County
Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8280 - SPECIAL SANITARY DEBT SERVICE

Line 2**APPROPRIATIONS**

1. Current Year Approved Budget	\$4,964,793
2. Encumbrances Brought Forward	\$0
3. 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	\$4,964,793

DISBURSEMENTS

6. January through June Current Year Disbursements	\$2,496,225
7. Appropriation Balance	\$2,468,568
8. Reductions July through December	\$0
9. Estimated Current Year Expenditures July through December	\$2,468,568

Line 3

10. Proposed/Approved Additional Appropriations for July through Dec. of Current Year	\$0
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Line 4A

11. Levy excess not transferred prior to June 30	\$0
12. Temporary Loans outstanding as of June 30	\$641,000
What fund loaned the cash on Line 12:	TAW
13. Temporary loans not included in Lines 2 or 3	\$641,000

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	\$2,857,939
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Line 7

16. Taxes to be collected, present year (December settlement)	\$2,067,258
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CURRENT YEAR FINANCIAL WORKSHEET

(Formerly Line 2 Worksheet)

Selected Year: 2019
Selected County: 45 - Lake County
Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS

Line 2**APPROPRIATIONS**

1. Current Year Approved Budget	\$3,667,051
2. Encumbrances Brought Forward	\$0
3. 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	\$3,667,051

DISBURSEMENTS

6. January through June Current Year Disbursements	\$2,760,113
7. Appropriation Balance	\$906,938
8. Reductions July through December	\$0
9. Estimated Current Year Expenditures July through December	\$906,938

Line 3

10. Proposed/Approved Additional Appropriations for July through Dec. of Current Year	\$0
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Line 4A

11. Levy excess not transferred prior to June 30	\$0
12. Temporary Loans outstanding as of June 30	\$1,721,000
What fund loaned the cash on Line 12:	TAW
13. Temporary loans not included in Lines 2 or 3	\$1,721,000

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	\$2,123,367
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Line 7

16. Taxes to be collected, present year (December settlement)	\$1,959,000
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DEBT WORKSHEET

Selected Year: 2019
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 Due	Line 11A Amount	Line 11B Due	Line 11B Amount
Special Taxing District Bond Series 2018C	12/30/2018	\$243,382	12/30/2019	\$516,356	6/30/2020	\$607,253	12/30/2020	\$435,353
Special Taxing District Refunding Bonds, Series 2018A Non-Exempt	7/15/2018	\$383,897	7/15/2019	\$786,600	1/15/2020	\$404,720	7/15/2020	\$366,800
Special Taxing District Bond Series 2015C	7/15/2018	\$366,379	7/15/2019	\$658,648	1/15/2020	\$323,632	7/15/2020	\$326,340
Special Taxing District Loan Series 2013A	7/15/2018	\$1,773,160	7/15/2019	\$3,558,668	1/15/2020	\$1,780,046	7/15/2020	\$1,778,546
Anticipated Debt Service		\$36,547		\$62,600		\$26,044		\$36,547
TOTALS BY FUND		\$2,803,365		\$5,582,872		\$3,141,695		\$2,943,586

DEBT WORKSHEET

Selected Year: 2019
Selected County: 45 - Lake County
Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS

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 Refunding Bonds Series 2018A Exempt	7/15/2018	\$814,880	7/15/2019	\$1,670,625	1/15/2020	\$860,030	7/15/2020	\$778,550
Special Taxing District Refunding Bonds Series 2014	7/15/2018	\$69,375	7/15/2019	\$1,670,625	1/15/2020	\$1,351,250	7/15/2020	\$33,750
TOTALS BY FUND		\$884,255		\$3,341,250		\$2,211,280		\$812,300

Totals by Unit	\$3,687,620	\$8,024,122	\$5,352,975	\$3,755,886
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Form Signature

NAME

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 Form 1 - Budget Estimate

Year: 2019 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	\$1,038,511	\$1,038,511
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	\$83,271	\$83,271
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	413.02	PERF	\$154,569	\$154,569
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	413.04	Insurance (life/health/w.c./u)	\$378,774	\$378,774
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	413.06	Clothing Allowance	\$2,850	\$2,850
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	\$150,000	\$150,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SUPPLIES	Repair and Maintenance Supplies	423.00	Repair - Maintenance Supplies	\$100,000	\$100,000
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	\$49,950	\$49,950
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Utility Services	435.00	Utilities	\$65,000	\$65,000

Fund	Department	Category	Sub-Category	Line Item Code	Line Item	Published	Adopted
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	SERVICES AND CHARGES	Repairs and Maintenance	436.00	Repairs - Maintenance	\$1,032,748	\$1,032,748
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
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	CAPITAL OUTLAYS	Machinery, Equipment, and Vehicles		Capital Purchase	\$100,000	\$100,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	CAPITAL OUTLAYS	Other Capital Outlays		Capital Leases	\$350,000	\$350,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	DEBT SERVICE	Payments on Tax Anticipation Warrants Interest	438.02	INTEREST	\$30,000	\$30,000
8201 - SPECIAL SANITARY GENERAL	NO DEPARTMENT	PROPERTY TAX CAP	Property Tax Cap Impact		Property Tax Cap Impact	\$1,585,485	\$1,585,485
8201 - SPECIAL SANITARY GENERAL Total						\$6,731,158	\$6,731,158
8280 - SPECIAL SANITARY DEBT SERVICE	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges	438.04	Trustee Fees	\$5,050	\$5,050
8280 - SPECIAL SANITARY DEBT SERVICE	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Principal	438.01	PRINCIPAL	\$3,451,000	\$3,451,000
8280 - SPECIAL SANITARY DEBT SERVICE	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Interest	438.02	INTEREST	\$2,064,222	\$2,064,222
8280 - SPECIAL SANITARY DEBT SERVICE Total						\$5,520,272	\$5,520,272
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges	438.04	Trustee Fees	\$2,050	\$2,050
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Principal	438.01	PRINCIPAL	\$2,604,000	\$2,604,000

Fund	Department	Category	Sub-Category	Line Item Code	Line Item	Published	Adopted
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	NO DEPARTMENT	DEBT SERVICE	Payments on Bonds and Other Debt Interest	438.01	INTEREST	\$735,200	\$735,200
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS Total						\$3,341,250	\$3,341,250
UNIT TOTAL						\$15,592,680	\$15,592,680

Budget Form 2 - Estimate of Miscellaneous Revenue

Year: 2019 County: Lake Unit: 0810 - Hammond Sanitary

Fund	Revenue Code	Revenue Name	July 1 - December 31, 2018	January 1 - December 31, 2019
8201 - SPECIAL SANITARY GENERAL	R112	Financial Institution Tax distribution	\$7,966	\$21,634
8201 - SPECIAL SANITARY GENERAL	R114	Motor Vehicle/Aircraft Excise Tax Distribution	\$45,395	\$138,907
8201 - SPECIAL SANITARY GENERAL	R135	Commercial Vehicle Excise Tax Distribution (CVET)	\$8,820	\$21,221
8201 - SPECIAL SANITARY GENERAL	R906	Refunds and Reimbursements	\$211	\$10,000
8201 - SPECIAL SANITARY GENERAL	R910	Transfers In - Transferred from Another Fund	\$839,807	\$1,500,000
8201 - SPECIAL SANITARY GENERAL	R913	Other Receipts	\$1,892	\$50,000
		SPECIAL SANITARY GENERAL	\$904,091	\$1,741,762
8280 - SPECIAL SANITARY DEBT SERVICE	R112	Financial Institution Tax distribution	\$10,610	\$26,406
8280 - SPECIAL SANITARY DEBT SERVICE	R114	Motor Vehicle/Aircraft Excise Tax Distribution	\$60,462	\$169,549
8280 - SPECIAL SANITARY DEBT SERVICE	R135	Commercial Vehicle Excise Tax Distribution (CVET)	\$11,748	\$25,902
8280 - SPECIAL SANITARY DEBT SERVICE	R913	Other Receipts	\$0	\$0
		SPECIAL SANITARY DEBT SERVICE	\$82,820	\$221,857
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	R112	Financial Institution Tax distribution	\$10,052	\$16,627
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	R114	Motor Vehicle/Aircraft Excise Tax Distribution	\$57,283	\$106,757
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	R135	Commercial Vehicle Excise Tax Distribution (CVET)	\$11,130	\$16,310
8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	R913	Other Receipts	\$0	\$0
		SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	\$78,465	\$139,694
		0810 - HAMMOND SANITARY Total	\$1,065,376	\$2,103,313

BUDGET REPORT FOR

Selected Year: 2019
Selected County: 45 - Lake County
Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8201 - SPECIAL SANITARY GENERAL

DEPARTMENT: 0000 NO DEPARTMENT		
	Advertised Amount	Adopted Amount
PERSONAL SERVICES	\$1,707,975	\$1,707,975
SUPPLIES	\$260,000	\$260,000
SERVICES AND CHARGES	\$2,697,698	\$2,697,698
CAPITAL OUTLAY	\$450,000	\$450,000
DEBT SERVICE	\$30,000	\$30,000
PROPERTY TAX CAPS	\$1,585,485	\$1,585,485
Total	\$6,731,158	\$6,731,158

Totals by Fund

Published Amt. \$6,731,158

Adopted Amt. \$6,731,158

BUDGET REPORT FOR

Selected Year: 2019
Selected County: 45 - Lake County
Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8280 - SPECIAL SANITARY DEBT SERVICE

DEPARTMENT: 0000 NO DEPARTMENT		
	Advertised Amount	Adopted Amount
PERSONAL SERVICES	\$0	\$0
SUPPLIES	\$0	\$0
SERVICES AND CHARGES	\$5,050	\$5,050
CAPITAL OUTLAY	\$0	\$0
DEBT SERVICE	\$5,515,222	\$5,515,222
PROPERTY TAX CAPS	\$0	\$0
Total	\$5,520,272	\$5,520,272

Totals by Fund	Published Amt. \$5,520,272	Adopted Amt. \$5,520,272
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BUDGET REPORT FOR

Selected Year: 2019
Selected County: 45 - Lake County
Selected Unit: 0810 - HAMMOND SANITARY
Selected Fund: 8284 - SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS

DEPARTMENT: 0000 NO DEPARTMENT		
	Advertised Amount	Adopted Amount
PERSONAL SERVICES	\$0	\$0
SUPPLIES	\$0	\$0
SERVICES AND CHARGES	\$2,050	\$2,050
CAPITAL OUTLAY	\$0	\$0
DEBT SERVICE	\$3,339,200	\$3,339,200
PROPERTY TAX CAPS	\$0	\$0
Total	\$3,341,250	\$3,341,250

Totals by Fund	Published Amt. \$3,341,250	Adopted Amt. \$3,341,250
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Totals by Unit	Published Amt. \$15,562,630	Adopted Amt. \$15,562,630
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Form Signature

NAME

TITLE

SIGNATURE/PIN

DATE

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Budget Estimate- Financial Statement-Proposed Tax Rate

Taxing Unit: 0810 - HAMMOND SANITARY
Fund Name: 8201 - SPECIAL SANITARY GENERAL
County: 45 - Lake County
Year: 2019

Net Assessed Value		\$3,280,581,864
Funds Required For Expenses To December 31st Of Incoming Year	Amount Used To Compute Published Budget	Appropriating Body
1. Total budget estimate for incoming year	\$6,731,158	\$6,731,158
a). School Transfer Out	\$0	\$0
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	\$3,114,870	\$3,114,870
3. Additional appropriation necessary to be made July 1 to December 31 of present year	\$0	\$0
4. Outstanding temporary loans	\$776,000	\$776,000
a). To be paid not included in lines 2 or 3		
b). Not repaid by December 31 of present year	\$0	\$0
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	\$10,622,028	\$10,622,028
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)	\$2,237,927	\$2,237,927
7. Taxes to be collected, present year (December settlement)	\$1,006,923	\$1,006,923
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year (Schedule on File):	\$904,091	\$904,091
a). Total Column A Budget Form 2		
b). Total Column B Budget Form 2	\$1,741,762	\$1,741,762
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	\$5,890,703	\$5,890,703
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	\$4,731,325	\$4,731,325
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)	(\$1,204,332)	(\$1,204,332)
12. Amount to be raised by tax levy (add lines 10 and 11)	\$3,526,993	\$3,526,993
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)	\$3,526,993	\$3,526,993
15. Levy Excess Fund applied to current budget	\$0	\$0
16. Net amount to be raised	\$3,526,993	\$3,526,993
17. Net Tax Rate on each one hundred dollars of taxable property	0.1075	0.1075
Property Tax Caps	Amount Used To Compute Published Budget	Appropriating Body
Property Tax Cap impact	\$1,585,485	\$1,585,485

Budget Estimate- Financial Statement-Proposed Tax Rate

Taxing Unit: 0810 - HAMMOND SANITARY
Fund Name: 8280 - SPECIAL SANITARY DEBT SERVICE
County: 45 - Lake County
Year: 2019

Net Assessed Value		\$3,280,581,864
Funds Required For Expenses To December 31st Of Incoming Year	Amount Used To Compute Published Budget	Appropriating Body
1. Total budget estimate for incoming year	\$5,520,272	\$5,520,272
a). School Transfer Out	\$0	\$0
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	\$2,766,818	\$2,766,818
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	\$641,000	\$641,000
b). Not repaid by December 31 of present year	\$0	\$0
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	\$8,928,090	\$8,928,090
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)	\$2,857,939	\$2,857,939
7. Taxes to be collected, present year (December settlement)	\$2,067,258	\$2,067,258
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	\$82,820	\$82,820
b). Total Column B Budget Form 2	\$221,857	\$221,857
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	\$5,229,874	\$5,229,874
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	\$3,698,216	\$3,698,216
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)	\$1,090,364	\$1,090,364
12. Amount to be raised by tax levy (add lines 10 and 11)	\$4,788,580	\$4,788,580
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)	\$4,788,580	\$4,788,580
15. Levy Excess Fund applied to current budget	\$0	\$0
16. Net amount to be raised	\$4,788,580	\$4,788,580
17. Net Tax Rate on each one hundred dollars of taxable property	0.1460	0.1460
Property Tax Caps	Amount Used To Compute Published Budget	Appropriating Body
Property Tax Cap Impact	\$0	\$0

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: 2019

Net Assessed Value		\$3,280,581,864
Funds Required For Expenses To December 31st Of Incoming Year	Amount Used To Compute Published Budget	Appropriating Body
1. Total budget estimate for incoming year	\$3,341,250	\$3,341,250
a). School Transfer Out	\$0	\$0
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	\$884,255	\$884,255
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	\$1,721,000	\$1,721,000
b). Not repaid by December 31 of present year	\$0	\$0
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	\$5,946,505	\$5,946,505
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)	\$2,123,367	\$2,123,367
7. Taxes to be collected, present year (December settlement)	\$1,959,000	\$1,959,000
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	\$78,465	\$78,465
b). Total Column B Budget Form 2	\$139,694	\$139,694
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	\$4,300,526	\$4,300,526
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	\$1,645,979	\$1,645,979
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)	\$1,105,015	\$1,105,015
12. Amount to be raised by tax levy (add lines 10 and 11)	\$2,751,619	\$2,751,619
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)	\$2,751,619	\$2,751,619
15. Levy Excess Fund applied to current budget	\$0	\$0
16. Net amount to be raised	\$2,751,619	\$2,751,619
17. Net Tax Rate on each one hundred dollars of taxable property	0.0839	0.0839
Property Tax Caps	Amount Used To Compute Published Budget	Appropriating Body
Property Tax Cap Impact	\$0	\$0

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 2019 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	Monday, October 01, 2018	Adoption Meeting Date	Monday, October 15, 2018
Public Hearing Time	6:00 PM	Adoption Meeting Time	6:00 PM
Public Hearing Location	Hammond City Council Chambers 5925 Calumet Avenue 2nd Floor, Hammond, IN 46320	Adoption Meeting Location	Hammond City Council Chambers 5925 Calumet Avenue 2nd Floor, Hammond, IN 46320
Estimated Civil Max Levy	\$3,526,993		
Property Tax Cap Credit Estimate	\$2,404,337		

1 Fund Name	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	\$5,145,673	\$3,526,993	\$0	\$3,408,341
8280-SPECIAL SANITARY DEBT SERVICE	\$5,520,272	\$4,788,580	\$0	\$4,539,557
8284-SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	\$3,341,250	\$2,751,619	\$0	\$4,300,826
Totals	\$14,007,195	\$11,067,192	\$0	\$12,248,724

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: **9418**

Be it ordained/resolved by the **HAMMOND CITY COUNCIL** that for the expenses of **HAMMOND SANITARY** for the year ending December 31, **2018** 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	Date of Adoption
Hammond City Council	Common Council and Mayor	10/15/2017

DLGF-Reviewed Funds

Fund Code	Fund Name	Adopted Budget	Adopted Tax Levy	Adopted Tax Rate
8201	SPECIAL SANITARY GENERAL	\$4,229,054	\$3,411,018	0.1117
8280	SPECIAL SANITARY DEBT SERVICE	\$4,964,793	\$4,540,731	0.1487
8284	SPECIAL SANITARY DEBT SERVICE EXEMPT FROM CIRCUIT BREAKERS	\$3,667,051	\$4,302,661	0.1410
		\$12,860,898	\$12,254,410	0.4014

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

Name		Signature
JANET VENECZ	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Janet Venecz /s/
MARK KALWINSKI	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Mark Kalwinski /s/
PETE TORRES	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Pete Torres /s/
ANTHONY W. HIGGS	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Anthony W. Higgs /s/
WILLIAM EMERSON	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	William Emerson /s/
DAVE C. WOERPEL	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Dave C. Woerpel /s/
SCOTT RAKOS	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Scott Rakos /s/
ROBERT A. MARKOVICH	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Robert A. Markovich /s/
DANIEL SPITALE	Aye <input checked="" type="checkbox"/> Nay <input type="checkbox"/> Abstain <input type="checkbox"/>	Daniel Spitale /s/

ATTEST

Name	Title	Signature
ROBERT J. GOLEC	City Clerk	Robert J. Golec /s/

MAYOR ACTION (For City Use Only)

Name		Signature	Date
THOMAS M. MCDERMOTT	Approve <input checked="" type="checkbox"/> Veto <input type="checkbox"/>	Thomas M. McDermott /s/	10/15/18