



## Legislation Details (With Text)

**File #:** 21-365      **Version:** 1      **Name:**  
**Type:** Operational Focus Updates      **Status:** Agenda Ready  
**File created:** 3/23/2021      **In control:** City Council  
**On agenda:** 3/30/2021      **Final action:**  
**Title:** Presentation and discussion on Capital Improvement quarterly update for active, rescheduled, and completed capital projects.  
**Sponsors:** Capital Improvement Department  
**Indexes:**  
**Code sections:**  
**Attachments:** 1. 03302118 CAP IMPROV QUARTERLY UPDATE.pdf, 2. 18

Date	Ver.	Action By	Action	Result
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## CITY OF EL PASO, TEXAS AGENDA ITEM SUMMARY FORM

### All Districts

Capital Improvement Department, Sam Rodriguez, (915) 212-0065

**PUBLIC HEARING DATE:** Click or tap to enter a date.

### **STRATEGIC GOAL:**

**Goal 4 - Enhance El Paso's Quality of Life through Recreational, Cultural and Educational Environments**

**SUBGOAL:** Choose an item.

### **SUBJECT:**

*APPROVE a Resolution / Ordinance / lease to do what? OR AUTHORIZE the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.*

Presentation and discussion on Capital Improvement quarterly update for active, rescheduled, and completed capital projects.

### **BACKGROUND / DISCUSSION:**

*Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?*

This presentation will provide an update on FY 2021 second quarter developments for active, rescheduled and completed capital projects.

### **PRIOR COUNCIL ACTION:**

*Has the Council previously considered this item or a closely related one?*

N/A

**AMOUNT AND SOURCE OF FUNDING:**

*How will this item be funded? Has the item been budgeted? If so, identify funding source by amount numbers and description of account. Does it require a budget transfer?*

N/A

\*\*\*\*\*REQUIRED AUTHORIZATION\*\*\*\*\*

**Department Head:**

*If Agenda Item Summary Form is initiated by Purchasing, client department should sign also*