



## BOARD ACTION REQUEST FORM

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### SECTION 1: PURPOSE

The BOARD ACTION REQUEST FORM is designed to 1) enhance the orderly and efficient conduct of Committee and Board meetings; 2) serve as prior notice to all interested parties; 3) aid the Committee Chairs in meeting preparation; 4) provide the Departments with a mechanism for formal communication with the Board; and 5) aid in the creation of the official record of the meeting.

To request an item be added to a committee agenda, submit the completed FORM and all supporting documentation to the applicable Committee Chair for consideration at least 5 days prior to the meeting date/time.

### SECTION 2: OVERVIEW

**Subject:** Safety and Security Plan **Requested by:** Greg Gates

**To Committee(s):** Properties, Executive and County Board **Meeting Date(s)** 10/11; 10/13; 10/20

**Action Requested (Select One):** ☒ **Motion** ☐ **Resolution** ☐ **Ordinance** ☐ **Contract Approval**

**Executive Session** ☐ **YES** ☒ **NO** **5 ILCS 120/2(c) Exception:** \_\_\_\_\_

#### Requestor's Recommended Action:

County Board approval of updated Safety and Security Plan for Lee Ogle Transportation System

### SECTION 3: PROPOSAL

*Describe the action requested, including relevant background information, applicable statutory references, potential impact to the County and/or any other departments, and the proposed implementation timeline. Attach additional pages if needed.*

Following consultation with Homeland Security, Law Enforcement, EMA and Fire and an extensive review of the current Safety and Security Plan of Lee Ogle Transportation System, a new plan has been developed. I am asking for the Properties Committee and Executive Committee to pass this new document along to the full Lee County Board for their consideration and approval.

### SECTION 4: FINANCIAL IMPACT

*Provide specific financial details including revenue or expenses associated with the request and if this is a one-time or recurring expense. If this is an unanticipated (unbudgeted) expense, explain the catalyst for the request. Attach relevant documents such as revenue/expense projections or vendor bids/quotes.*

**Budgetary Status (check all that apply):** **Cost of Proposed Action:** \$ 0

- ☒ This action has no budgetary implications.
- ☐ Funds are available in this FY budget. Line-item Description/Number \_\_\_\_\_
- ☐ Funds are not budgeted in this FY. Proposed funding source: \_\_\_\_\_
- ☐ If approved, funds will be requested for this action in next year's budget.
- ☐ This action will bring in additional revenue of \$\_\_\_\_\_ Line-item \_\_\_\_\_
- ☐ This action will reduce expenditures and/or be budget neutral.

N/A