Exhibit E Financial Impact Statement

APPENDIX 7

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEP	PARTMENT				
	ISION A				
PER	SON COMPLETING THIS				
STATEMENT ILC. Lewin TELEPHONE NO. 5/2-6/9-7287 FAX NO. 5/2-479-8302 EMAIL: ilevin Benvironin					
TEL	EPHONE NO. <u>5/2 - 6/9 - 7287</u> FAX NO	0.512-479-8302 EMAIL: ilevin Benvilona			
		.			
To cand i	omply with Act 1104 of 1995, please comp file two copies with the questionnaire and p	lete the following Financial Impact Statement roposed rules.			
SHC	ORT TITLE OF THIS RULE				
1.	Does this proposed, amended, or repealed rule have a financial impact? Yes No				
2.	Does this proposed, amended, or repealed rule affect small businesses? Yes No				
	If yes, please attach a copy of the economic impact statement required to be filed with the Arkansas Economic Development Commission under Arkansas Code § 25-15-301 et seq.				
3.	If you believe that the development of a be cost prohibited, please explain.	financial impact statement is so speculative as to			
4. incre	emental cost for implementing the rule. Ple	nt a federal rule or regulation, please give the ease indicate if the cost provided is the cost of the			
	Current Fiscal Year	Next Fiscal Year			
	General Revenue NA Federal Funds NA	General Revenue NA Federal Funds			

	Cash Funds		Cash	
Funds	3	Special Revenue		
	Special Revenue Other (Identify)		Other(Identify)	
***************************************	Total NA	Total_	n/A	
amend	What is the total estimated cost by fiscal year to any party subject to the proposed, led, or repealed rule? Identify the party subject to the proposed rule and explain how re affected.			
	Current Fiscal Year		Next Fiscal Year	
	s_n/A	\$	nla	
6.	What is the total estimated cost by fiscal year to the agency to implement this rule? It this the cost of the program or grant? Please explain.			
	Current Fiscal Year		Next Fiscal Year	
	s n/A	\$	nlA	
			•	

APPENDIX 7

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DIV. PER	ISION/A SON COMPLETING THIS	0.512-479-8302 EMAIL: ilev: - Benv:10-m	
To c	omply with Act 1104 of 1995, please comp	lete the following Financial Impact Statement	
and f	file two copies with the questionnaire and port TITLE OF THIS RULE	proposed rules.	
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2.	Does this proposed, amended, or repealed rule affect small businesses? Yes No If yes, please attach a copy of the economic impact statement required to be filed with the Arkansas Economic Development Commission under Arkansas Code § 25-15-301 et seq.		
3.	If you believe that the development of a financial impact statement is so speculative as to be cost prohibited, please explain.		
4. incre	emental cost for implementing the rule. Ple	nt a federal rule or regulation, please give the ease indicate if the cost provided is the cost of the	
	Current Fiscal Year	Next Fiscal Year	
	General Revenue N/A Federal Funds N/A	General Revenue Federal Funds A	

	Cash Funds		Casn	
Funds	·	Special Revenue		
	Special Revenue Other (Identify)	·	Other(Identify)	
	Total NA	Total_	n/A	
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	s n/A	\$	n/A	