

Town of Moultonborough

Public Works

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Scott D. Kinmond, Highway/Road Agent
Director of Public Works

To: Capital Improvement Program Committee
Cc: Bruce Woodruff, Town Planner
From: Scott D. Kinmond, Highway/Road Agent
Re: Updated/revise- CIP Requests for 2015-2020
Date: April 10, 2014

Chairman Brown & Planner Woodruff,

Please find listed below two (2) CIP request list which are submitted and managed under the Public Works Department. These are detailed as Moving Equipment and Facilities. Road projects remain the same as requested with an additional year in 2020 with an annual escalator increase of approx. 3%.

2015-2020- MOVING EQUIPMENT

2015

\$225,000 Payloader w/attachments (Broom, bucket & plow)
Replacement of: 1995 Komatsu WA250 loader
(Updated value on trade)

2016

\$50,000 One-ton pick-up w/ plow and sander (revised)
Replacement of: 2003 One-ton pick-up with plow & sander
Trade of: 2005 Ford Ranger pickup. (Not replaced, contracted vehicle used)

\$225,000 10 wheel 55k GVW dump truck with plow, wing and sander
Replacement of: 2000 GMC C8500 Dump w/plow, wing and sander
2003 GMC C7500, placed as a spare plow truck

2017

\$50,000 One-ton pick up w/ plow and sander
Replacement of: 2006 GMC 2500HD pickup with plow and sander

2017 (con't)

\$28,000 Fleet Van- 7 passenger
Replacement of: 2010 Dodge Caravan 7-passenger

2018

\$55,000 Tractor w/bucket loader and attachments
Replacement of: 1994 Ford 1320 tractor w/ attachment

2019

\$65,000 Skid steer w/ bucket, pallet forks and plow.
Replacement of: 2004 Case 60XT skid steer (WMF)

\$120,000 6-wheel 19.5K GVW dump w/ plow, wing and sander
Replacement of: 2009 Ford F550 w/ dump, plow, wing and sander

2020

\$120,000 6-wheel 19.5K GVW dump w/ plow, wing and sander
Replacement of: 2010 Ford F550 w/ dump, plow, wing and sander

2015-2020- FACILITIES PROJECTS

\$66,000 Window replacements- Recreation Center

\$20,000 PSB Parking lot reconstruction & slab repair engineering & design

\$25,000 Highway Garage water system- well/filtration system

2016

\$70,000 Window replacements- Town Hall

\$50,000 Lions Club Roof

\$300,000 PSB Slab repair

2017

\$75,000 Window replacements- PSB

\$350,000 PSB Parking lot reconstruction

2018

\$30,000 Facilities Flooring & Paint- PSB

2019

\$30,000 Facilities Flooring & Paint- PSB

2020

\$400,000 Highway Garage 2 bay addition/existing structure rehab.

2015

(updated)

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW Date Prepared 3-31-14
Contact Person Scott Kinmand Phone Number 253-7445

1. Project Title & Reference No.
Payloader Replacement

2. Form of Acquisition (check appropriate)
LEASE Purchase

3. Number of Units Requested
1

5. Purpose of Expenditure (check appropriate)
- Schedule replacement
 - Present equipment obsolete
 - Replace worn-out equipment
 - Reduce personnel time
 - Expanded service
 - New operation
 - Increased safety
 - Improve procedures, records, etc.

5a. Describe Alternatives Considered:
Seasonal Rental -

4. Cost

	Per Unit	Total
Purchase price or annual rental	\$ <u>225,000.00</u>	<u>225,000.00</u>
Plus: Installation or other costs	\$ <u>0</u>	<u>0</u>
Less: Trade-in or other discount	\$ <u>25,000</u>	<u>25,000</u>
Net purchase cost or annual rental	\$ <u>200,000.00</u>	<u>\$200,000.00</u>

6. Number of Similar Items in Inventory 1

7. Estimated Use of Requested Item(s)

	Months per year	Estimated useful life in years
Weeks per year		
Days per week		<u>12</u>
Hours per day		

8. Replaced Item(s)

Item	Make	Age	Prior Year's		
			Maint Costs	Breakdowns	Rental Costs
A. <u>Komatsu WA250 Payloader</u>	<u>KOMATSU</u>	<u>20</u>			
B. <u>Pickup Truck (Larger)</u>	<u>Ford</u>	<u>10</u>			
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)
 Possible used by other agencies Trade-in Sale

10. Submitting Authority
Submitted by: Scott D. Kinmand Date: 3-31-14
Position: DPW - Director

11. Reserved

(2016)

Revised

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW Date Prepared 3-31-14
 Contact Person Scott Kinnard Phone Number 253-7445

1. Project Title & Reference No.
Pick up Truck Replacement

2. Form of Acquisition (check appropriate)
Purchase

3. Number of Units Requested
1

5. Purpose of Expenditure (check appropriate)
- Schedule replacement
 - Present equipment obsolete
 - Replace worn-out equipment
 - Reduce personnel time
 - Expanded service
 - New operation
 - Increased safety
 - Improve procedures, records, etc.

5a. Describe Alternatives Considered:

4. Cost

	Per Unit	Total
Purchase price or annual rental	\$ <u>50,000</u>	<u>50,000.00</u>
Plus: Installation or other costs	\$ <u>0</u>	<u>0</u>
Less: Trade-in or other discount	\$ <u>3000.00</u>	<u>3000.00</u>
Net purchase cost or annual rental	\$ <u>47,000.00</u>	<u>47,000.00</u>

6. Number of Similar Items in Inventory 2

7. Estimated Use of Requested Item(s)

	Months per year	Estimated useful life in years
Months per year		
Weeks per year		
Days per week		<u>10</u>
Hours per day		

8. Replaced Item(s)

Item	Make	Age	Maint Costs	Prior Year's	
				Breakdowns	Rental Costs
A. <u>Pickup Truck, Plow & Sander</u>	<u>Ford</u>	<u>13</u>			
B.					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)

Possible used by other agencies Trade-in Sale

10. Submitting Authority

Submitted by: Scott D Kinnard Date: 3-31-14
 Position: DPW - Director

11. Reserved

2016

(Revised)

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW
Contact Person SCOTT KINMEND

Date Prepared 3-31-14
Phone Number 253-7445

1. Project Title & Reference No.
to what Dump Truck w/ Plow, Wing & Loader

2. Form of Acquisition (check appropriate)
Purchase

3. Number of Units Requested
1

5. Purpose of Expenditure (check appropriate)
- Schedule replacement
 - Present equipment obsolete
 - Replace worn-out equipment
 - Reduce personnel time
 - Expanded service
 - New operation
 - Increased safety
 - Improve procedures, records, etc.

5a. Describe Alternatives Considered:

4. Cost

	Per Unit	Total
Purchase price or annual rental	\$ <u>225,000.</u>	<u>225,000</u>
Plus: Installation or other costs	\$ <u>0</u>	<u>0</u>
Less: Trade-in or other discount	\$ <u>10,000</u>	<u>10,000</u>
Net purchase cost or annual rental	\$ <u>215,000</u>	<u>215,000</u>

6. Number of Similar Items in Inventory 0

7. Estimated Use of Requested Item(s)

Months per year	Estimated useful life in years
Weeks per year	
Days per week	<u>15</u>
Hours per day	

8. Replaced Item(s)

Item	Make	Age	Maint Costs	Prior Year's	
				Breakdowns	Rental Costs
A. <u>Dump truck w/ Plows + Loader</u>	<u>Gmc</u>	<u>16</u>			
B.					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)

- Possible used by other agencies Trade-in Sale

10. Submitting Authority

Submitted by: SCOTT D. KINMEND
Position: DPW - Director

Date: 3-31-14

11. Reserved

2017

(Revised)

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW
Contact Person Scott Kinnard

Date Prepared 3-31-14
Phone Number 253-7445

1. Project Title & Reference No. Pickup Truck Replacement

2. Form of Acquisition (check appropriate) Purchase

3. Number of Units Requested 1

5. Purpose of Expenditure (check appropriate)
- Schedule replacement
 - Present equipment obsolete
 - Replace worn-out equipment
 - Reduce personnel time
 - Expanded service
 - New operation
 - Increased safety
 - Improve procedures, records, etc.

5a. Describe Alternatives Considered:

4. Cost

	Per Unit	Total
Purchase price or annual rental	\$ <u>50,000</u>	<u>50,000</u>
Plus: Installation or other costs	\$ <u>0</u>	<u>0</u>
Less: Trade-in or other discount	\$ <u>3,000</u>	<u>3,000</u>
Net purchase cost or annual rental	\$ <u>47,000</u>	<u>47,000</u>
6. Number of Similar Items in Inventory		<u>2</u>

7. Estimated Use of Requested Item(s)

Months per year	Estimated useful life in years
Weeks per year	
Days per week	<u>10</u>
Hours per day	

8. Replaced Item(s)

Item	Make	Age	Maint Costs	Prior Year's	
				Breakdowns	Rental Costs
A. <u>Pickup Truck w/ Plow + Sprayer</u>	<u>GM</u>	<u>12</u>			
B.					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)
 Possible used by other agencies Trade-in Sale

10. Submitting Authority
Submitted by: Scott Kinnard Date: 3-31-14
Position: DPW - Director

11. Reserved

(2017)

(Reserved)

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW Date Prepared 3-31-14
 Contact Person Scott D. Kimmend Phone Number 253-7445

1. Project Title & Reference No. Fleet VAN

2. Form of Acquisition (check appropriate) Purchase

3. Number of Units Requested 1

5. Purpose of Expenditure (check appropriate)
- Schedule replacement
 - Present equipment obsolete
 - Replace worn-out equipment
 - Reduce personnel time
 - Expanded service
 - New operation
 - Increased safety
 - Improve procedures, records, etc.

5a. Describe Alternatives Considered:

4. Cost

	Per Unit	Total
Purchase price or annual rental \$	<u>28,000</u>	<u>28,000</u>
Plus: Installation or other costs \$	<u>0</u>	<u>0</u>
Less: Trade-in or other discount \$	<u>3,000</u>	<u>3,000</u>
Net purchase cost or annual rental \$	<u>25,000</u>	<u>25,000</u>

6. Number of Similar Items in Inventory 0

7. Estimated Use of Requested Item(s)

Months per year	Estimated useful life in years
Weeks per year	
Days per week	<u>7</u>
Hours per day	

8. Replaced Item(s)

Item	Make	Age	Prior Year's		
			Maint Costs	Breakdowns	Rental Costs
A. <u>7PASS VAN</u>	<u>Dodge</u>	<u>7</u>			
B.					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)

Possible used by other agencies Trade-in Sale

10. Submitting Authority

Submitted by: Scott D Kimmend Date: 3-31-14
 Position: DPW - Director

11. Reserved

2018

(New)

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW Date Prepared 3-31-14
 Contact Person Scott Kinnard Phone Number 253-7445

1. Project Title & Reference No. Tractor - loader

2. Form of Acquisition (check appropriate) Purchase

3. Number of Units Requested 1

5. Purpose of Expenditure (check appropriate)

- Schedule replacement
- Present equipment obsolete
- Replace worn-out equipment
- Reduce personnel time
- Expanded service
- New operation
- Increased safety
- Improve procedures, records, etc.

5a. Describe Alternatives Considered:

		Per Unit	Total
Purchase price or annual rental	\$	<u>55,000.00</u>	<u>55,000.00</u>
Plus: Installation or other costs	\$		
Less: Trade-in or other discount	\$	<u>5,000</u>	<u>5,000</u>
Net purchase cost or annual rental	\$	<u>20,000.00</u>	<u>50,000</u>

6. Number of Similar Items in Inventory 1

7. Estimated Use of Requested Item(s)

Months per year	Estimated useful life in years
Weeks per year	
Days per week	<u>25</u>
Hours per day	

Item	Make	Age	Maint Costs	Prior Year's	
				Breakdowns	Rental Costs
A. <u>1320 4x4 Tractor</u>	<u>Ford</u>				
B.					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)

Possible used by other agencies Trade-in Sale

10. Submitting Authority

Submitted by: Scott Kinnard Date: 3-31-14
 Position: DPW - Dir

11. Reserved

2019

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW Date Prepared 3-31-14
 Contact Person Scott Kinnard Phone Number 253-7445

1. Project Title & Reference No.
Skid Steer Replacement

2. Form of Acquisition (check appropriate)
Purchase

3. Number of Units Requested
1

5. Purpose of Expenditure (check appropriate)
- Schedule replacement
 - Present equipment obsolete
 - Replace worn-out equipment
 - Reduce personnel time
 - Expanded service
 - New operation
 - Increased safety
 - Improve procedures, records, etc.

5a. Describe Alternatives Considered:

4. Cost

	Per Unit	Total
Purchase price or annual rental	\$ <u>55,000.⁰⁰</u>	<u>55,000.⁰⁰</u>
Plus: Installation or other costs	\$	

Less: Trade-in or other discount	\$ <u>5,000</u>	<u>5,000</u>
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Net purchase cost or annual rental	\$ <u>50,000</u>	<u>50,000</u>
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6. Number of Similar Items in Inventory 1

7. Estimated Use of Requested Item(s)

Months per year	Estimated useful life in years
Weeks per year	
Days per week	<u>15</u>
Hours per day	

8. Replaced Item(s)

Item	Make	Age	Maint Costs	Prior Year's	
				Breakdowns	Rental Costs
A. <u>Coast Skid Steer</u>	<u>CASE</u>				
B.					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)

Possible used by other agencies Trade-in Sale

10. Submitting Authority

Submitted by: Scott Kinnard Date: 3-31-14
 Position: DPW Director

11. Reserved

2019

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW Date Prepared A-8-14
 Contact Person Scott Kimmel Phone Number 253-7445

1. Project Title & Reference No.
buheel 195GVW Dump, Plow, Wing & Spreader

2. Form of Acquisition (check appropriate)
 Purchase

3. Number of Units Requested
1

5. Purpose of Expenditure (check appropriate)
- Schedule replacement
 - Present equipment obsolete
 - Replace worn-out equipment
 - Reduce personnel time
 - Expanded service
 - New operation
 - Increased safety
 - Improve procedures, records, etc.

5a. Describe Alternatives Considered:
None

4. Cost		Per Unit	Total
Purchase price or annual rental	\$	<u>120,000</u>	<u>120,000</u>
Plus: Installation or other costs	\$		
Less: Trade-in or other discount	\$	<u>10,000</u>	<u>10,000</u>
Net purchase cost or annual rental	\$	<u>110,000</u>	<u>110,000</u>

6. Number of Similar Items in Inventory _____

7. Estimated Use of Requested Item(s)

_____ Months per year	Estimated useful
_____ Weeks per year	<u>10</u> life in years
_____ Days per week	
_____ Hours per day	

8. Replaced Item(s)

Item	Make	Age	Prior Year's		
			Maint Costs	Breakdowns	Rental Costs
A. <u>Replace 19.5K Dump, Plow, wing</u>	<u>Ford F550</u>	<u>10</u>			
B. <u>and Spreader (2009)</u>					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)

Possible used by other agencies Trade-in Sale

10. Submitting Authority

Submitted by: Scott Kimmel Date: 9-8-14
 Position: DPW Director

11. Reserved

2009

FORM B

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity DPW Date Prepared 4-8-14
Contact Person Scott Kimmel Phone Number 253-7445

1. Project Title & Reference No. Replacement bucket 19.5K GVW Dump, & spreader ^{Plow, wing}
4. Cost

2. Form of Acquisition (check appropriate) Purchase
Purchase price or annual rental \$ 120,000 Per Unit 120,000 Total

3. Number of Units Requested 1
Plus: Installation or other costs \$ 0

5. Purpose of Expenditure (check appropriate)
 Schedule replacement
 Present equipment obsolete
 Replace worn-out equipment
 Reduce personnel time
 Expanded service
 New operation
 Increased safety
 Improve procedures, records, etc.

Less: Trade-in or other discount \$ 12,000.00 12,000.00

Net purchase cost or annual rental \$ 108,000 108,000

5a. Describe Alternatives Considered: lease

6. Number of Similar Items in Inventory 2

7. Estimated Use of Requested Item(s)
Months per year _____ Estimated useful
Weeks per year 10 life in years
Days per week _____
Hours per day _____

8. Replaced Item(s)

Item	Make	Age	Prior Year's		
			Maint Costs	Breakdowns	Rental Costs
A. <u>2010 bucket 19.5K GVW Dump</u>	<u>Ford</u>	<u>10</u>			
B. <u>Plow, wing & spreader</u>					
C.					
D.					
E.					

9. Recommended Disposition of Replacement Item(s)
 Possible used by other agencies Trade-in Sale

10. Submitting Authority
Submitted by: Scott Kimmel Date: 4-8-14
Position: DPW Director

11. Reserved

2015
FORM A

CAPITAL PROJECT REQUEST
Excluding Equipment

Department & Activity <u>DPW - facilities</u>		Date Prepared <u>4-10-14</u>
Contact Person <u>Scott Kinnard</u>		Phone Number <u>253-7445</u>
1. Project Title <u>Water System - Well</u>	2. Purpose of Project Request Form (Check One) <input type="checkbox"/> Add a new item to the program <input type="checkbox"/> Delete an item in a year already a part the program <input type="checkbox"/> Modify a project already in the adopted program	
3. Department Priority		
4. Location <u>Hwy Garage</u>		
5. Description <u>Locate usable low chloride water for use at facility -</u>		
5.a. Describe Alternatives Considered: <u>nothing</u>		
6. Justification & Useful Life <u>minimize deterioration to water system, equip and allow for drinkability</u>		
7. Cost & Recommended Sources of Financing		
BUDGET FY	TOTAL*	RECOMMENDED SOURCES OF FINANCING
Program year FY <u>15</u>	<u>25,000</u>	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
TOTAL SIX YEARS	_____	_____
After Sixth Year	_____	_____
If adjusted for inflation, indicate adjustment percentage here: _____		
*Interest cost not included.		
8. Net Effects on Operating Costs (+/-)		9. Net Effect on Municipal Income (+/-)
Direct Costs		taxes _____
personnel: number _____		other income _____
\$ amount _____		Subtotal _____
purchase of service _____		gain from sale of _____
materials & supplies _____		replaceable assets _____
equipment purchases _____		Total _____
utilities _____		
other _____		
Subtotal () _____		
Indirect Operating Costs		10. Submitting Authority
fringe benefits _____		<u>DPW</u>
general admin. Costs _____		Submitted by _____ Date <u>4-10-14</u>
other _____		Position <u>DPW Director</u>
Subtotal () _____		Signature <u>[Signature]</u>
Total Operating Cost _____		11. Reserved
Debt Service (P&I) _____		
Total Operating Cost _____		

New

2015

FORM A CAPITAL PROJECT REQUEST Excluding Equipment

Department & Activity <u>DPW - Facilities Facilities</u>		Date Prepared <u>4-10-14</u>
Contact Person <u>Scott Kinnard</u>		Phone Number <u>253-7445</u>
1. Project Title <u>PSB Slab & Parking Lot Engineering</u>	2. Purpose of Project Request Form (Check One)	
3. Department Priority <u>DPW</u>	<input type="checkbox"/> Add a new item to the program	
4. Location <u>PSB - FD</u>	<input type="checkbox"/> Delete an item in a year already a part the program	
<input type="checkbox"/> Modify a project already in the adopted program		
5. Description <u>Engineering Task order for Design Recommendation to Repair Slab Settling & Parking Lot Reconstruction & Drainage.</u>		
5.a. Describe Alternatives Considered: <u>Deferr. - Nothing</u>		
6. Justification & Useful Life <u>Slab Repair to Avoid drainage issues, walking hazard and concrete. PL Proper design and repair, Asset Management,</u>		
7. Cost & Recommended Sources of Financing		
BUDGET FY	TOTAL*	RECOMMENDED SOURCES OF FINANCING
Program year FY <u>16</u>	<u>20,000</u>	<u>Taxpayer.</u>
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
TOTAL SIX YEARS _____	_____	_____
After Sixth Year _____	_____	_____
If adjusted for inflation, indicate adjustment percentage here: _____		
*Interest cost not included.		
8. Net Effects on Operating Costs (+/-)		9. Net Effect on Municipal Income (+/-)
Direct Costs		taxes _____
personnel: number _____	_____	other income _____
\$ amount _____	_____	Subtotal _____
purchase of service _____	_____	gain from sale of _____
materials & supplies _____	_____	replaceable assets _____
equipment purchases _____	_____	Total _____
utilities _____	_____	<u>DPW</u>
other _____	_____	
Subtotal () _____	_____	
Indirect Operating Costs		10. Submitting Authority
fringe benefits _____	_____	<u>Scott Kinnard</u>
general admin. Costs _____	_____	Submitted by _____ Date <u>4-10-14</u>
other _____	_____	Position _____
Subtotal () _____	_____	<u>[Signature]</u>
Total Operating Cost _____	_____	Signature _____
Debt Service (P&I) _____	_____	11. Reserved
Total Operating Cost _____	_____	

2020

FORM A
CAPITAL PROJECT REQUEST
Excluding Equipment

Department & Activity <u>DPW - Facilities</u>		Date Prepared <u>4-10-14</u>
Contact Person <u>Scott D. Kimmel</u>		Phone Number <u>253-7445</u>
1. Project Title <u>DPW Facility - Rehab + Addition</u>	2. Purpose of Project Request Form (Check One)	
3. Department Priority	Add a new item to the program	
4. Location <u>Heavy Garage</u>	Delete an item in a year already a part the program	
5. Description <u>Add (2-Additional Bay) 1-Mechanical Service Bay 1-Wash Bay for equipment washing due to chloride use, Rehab Elect. and Mechanical Systems, Roof Structure of Existing Facility</u>		
5.a. Describe Alternatives Considered: <u>- nothing - continue to maintain existing</u>		
6. Justification & Useful Life <u>- 30 yrs., Better Ability to maintain the town infrastructure and maintenance equipment.</u>		
7. Cost & Recommended Sources of Financing		
BUDGET FY	TOTAL*	RECOMMENDED SOURCES OF FINANCING
Program year FY <u>20</u>	<u>400,000</u>	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
TOTAL SIX YEARS	_____	_____
After Sixth Year	_____	_____
If adjusted for inflation, indicate adjustment percentage here: _____		
*Interest cost not included.		
8. Net Effects on Operating Costs (+/-)		9. Net Effect on Municipal Income (+/-)
Direct Costs		taxes _____
personnel: number _____	_____	other income _____
\$ amount _____	_____	Subtotal _____
purchase of service _____	_____	gain from sale of _____
materials & supplies _____	_____	replaceable assets _____
equipment purchases _____	_____	Total _____
utilities _____	_____	
other _____	_____	
Subtotal () _____	_____	
Indirect Operating Costs		10. Submitting Authority
fringe benefits _____	_____	<u>DPW</u> <u>4-10-15</u>
general admin. Costs _____	_____	Submitted by _____ Date
other _____	_____	<u>Scott Kimmel</u>
Subtotal () _____	_____	Position
Total Operating Cost _____	_____	<u>DPW Director</u>
Debt Service (P&I) _____	_____	Signature _____
Total Operating Cost _____	_____	11. Reserved

FORM C

CAPITAL IMPROVEMENT PROGRAM DETAILED PROJECT DESCRIPTION

(May be filled out by CIP Committee to summarize Project Information)

A. IDENTIFICATION & CODING INFORMATION

1. Date: 4-10-14
 2. Project Name: Highway Garage + Addition/Rehab
 3. Program: Facilities 4. Department: DPW

B. EXPENDITURE SCHEDULE (000'S)

Cost Elements	\$ Total	Thru FY	Est. FY	Total 6 Years	Year 1 FY	Year 2 FY	Year 3 FY	Year 4 FY	Year 5 FY	Year 6 FY	Beyond 6 Years
1. Planning Design & Supervision				25,000							
2. Land											
3. Site Improvements & Utilities				50,000							
4. Construction				250,000							
5. Furniture & Equipment				75,000							
6. Total				400,000							

C. FUNDING SCHEDULES (000'S)

GO Bonds: _____
 State Aid: _____
 General Fund: _____
 Capital Reserve: _____
 Grant Funding: _____

D. DESCRIPTION & JUSTIFICATION

E. ANNUAL OPERATING BUDGET IMPACT (000'S)

Program Costs: Staff _____
 Other _____
 Facility Costs: Maint. _____
 Other _____
 Debt Service _____
 Total Costs _____
 Other Revenue _____
 or Cost Savings _____

F. MAP Reference Code:

2020

FORM A

CAPITAL PROJECT REQUEST

Excluding Equipment

Department & Activity <u>DPW - Road Project</u>		Date Prepared <u>4-10-14</u>
Contact Person <u>Scott Kinnard</u>		Phone Number <u>253-7445</u>
1. Project Title <u>2020 Road Projects</u>	2. Purpose of Project Request Form (Check One) <input type="checkbox"/> Add a new item to the program <input type="checkbox"/> Delete an item in a year already a part the program <input type="checkbox"/> Modify a project already in the adopted program	
3. Department Priority		
4. Location <u>TBD</u>		
5. Description <u>Annual road projects - 60% preservation, 40% reconstruction, roads are determined by RBMS II program and based upon condition</u>		
5.a. Describe Alternatives Considered: <u>Continued Patching Hazard / deteriorated areas</u>		
6. Justification & Useful Life <u>Asphalt preservation - (3-10) Reclaim, Shim & overlay, Chip Seal (1-3yr)</u> <u>Reconstruction (12-17y)</u>		
7. Cost & Recommended Sources of Financing		
BUDGET FY	TOTAL*	RECOMMENDED SOURCES OF FINANCING
Program year FY <u>20</u>	<u>\$950,000</u>	<u>TBD</u>
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
Program year FY _____	_____	_____
TOTAL SIX YEARS	_____	_____
After Sixth Year	_____	_____
If adjusted for inflation, indicate adjustment percentage here:		
*Interest cost not included.		
8. Net Effects on Operating Costs (+/-)		9. Net Effect on Municipal Income (+/-)
Direct Costs		taxes _____
personnel: number _____		other income _____
\$ amount _____		Subtotal _____
purchase of service _____		gain from sale of _____
materials & supplies _____		replaceable assets _____
equipment purchases _____		Total _____
utilities _____		
other _____		
Subtotal () _____		
Indirect Operating Costs		10. Submitting Authority
fringe benefits _____		<u>DPW</u> <u>4-10-14</u>
general admin. Costs _____		Submitted by _____ Date _____
other _____		<u>DPW Dir</u>
Subtotal () _____		Position <u>Scott Kinnard</u>
Total Operating Cost _____		Signature _____
Debt Service (P&I) _____		11. Reserved
Total Operating Cost _____		