



CIP Project Request Form

For Internal Use
Project ID: _____

Please reference the document titled "INSTRUCTIONS FOR COMPLETING CAPITAL IMPROVEMENTS PROJECTS (CIP) REQUESTS" for guidance on the application.

Capital Projects - New or Expansion Capital Maintenance – New Project Capital Maintenance - Projects that are neither New nor expanding

Project Title: _____

Location: _____

Date: _____

Department: _____

Employee Submitting Request: _____

Included in Board's Current Adopted CIP? Yes No

Department Priority No.: _____

Out of how many submittals? _____

Proposed Schedule/Cost

Date Improvements Begin: _____

Design/Engineering Cost: _____

Date Improvements Completed: _____

Construction Cost: _____

Useful Life of Facility/Equipment: _____

Previous Funding: _____

Dollars in Thousands	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	Total
Proposed Capital Budget	_____	_____	_____	_____	_____	_____
Expected additional Annual Operating Budget expenses incurred to directly support the new facility/equipment:	_____	_____	_____	_____	_____	_____
Expected new Annual Revenue generated from the new facility/equipment:	_____	_____	_____	_____	_____	_____

Project Narrative

The purpose of the narrative is to explain the proposal and provide an understanding of the life cycle cost (which is the sum of all recurring and one-time costs over the full life span of the project). Please explain in detail. Submit additional material as needed, including copies of engineering or feasibility studies.

(a) Current condition/situation: _____

(b) Requested change/project description: _____

(c) Need for the project, benefit, and why is this the optimal solution: _____

(d) Recurring and one-time costs and if there is any residual or salvage value at the end of ownership: _____

Evaluation Questions for Capital Projects – Not Necessary for Capital Maintenance

Questions	Y	N	Comments/Supporting Details
<i>In General</i>			
A. Is the project in conformance with and supportive of the goals, strategies, and actions set forth in the Comprehensive Plan?	<input type="checkbox"/>	<input type="checkbox"/>	
B. Does the project support objectives addressed in a County sponsored service plans, master plans, or studies?	<input type="checkbox"/>	<input type="checkbox"/>	
C. Does the project relate to the results of the citizen survey, Board of Supervisors policy, or appointed committee or board?	<input type="checkbox"/>	<input type="checkbox"/>	
<i>1. Quality of Life</i>			
D. Does the project increase or enhance educational opportunities?	<input type="checkbox"/>	<input type="checkbox"/>	
E. Does the project increase or enhance recreational opportunities and/or green space?	<input type="checkbox"/>	<input type="checkbox"/>	
F. Will the project mitigate blight?	<input type="checkbox"/>	<input type="checkbox"/>	
G. Does the project target the quality of life of all citizens or does it target one demographic? Is one population affected positively and another negatively?	<input type="checkbox"/>	<input type="checkbox"/>	
H. Does the project preserve or improve the historical, archeological and/or natural heritage of the County? Is it consistent with established Community Character?	<input type="checkbox"/>	<input type="checkbox"/>	
I. Does the project affect traffic positively or negatively?	<input type="checkbox"/>	<input type="checkbox"/>	
J. Does the project improve, mitigate, and/or prevent degradation of environmental quality (e.g. water quality, protect endangered species, improve or reduce pollution including noise and/or light pollution)?	<input type="checkbox"/>	<input type="checkbox"/>	
<i>2. Infrastructure</i>			
D. Is there a facility being replaced that has exceeded its useful life and to what extent?	<input type="checkbox"/>	<input type="checkbox"/>	
E. Do resources spent on maintenance of an existing facility justify replacement?	<input type="checkbox"/>	<input type="checkbox"/>	
F. Does this replace an outdated system?	<input type="checkbox"/>	<input type="checkbox"/>	
G. Does the facility/system represent new technology that will provide enhanced service?	<input type="checkbox"/>	<input type="checkbox"/>	
H. Does the project extend service for desired economic growth?	<input type="checkbox"/>	<input type="checkbox"/>	

3. Economic Development			
D. Does the project have the potential to promote economic development in areas where growth is desired?	<input type="checkbox"/>	<input type="checkbox"/>	
E. Will the project continue to promote economic development in an already developed area?	<input type="checkbox"/>	<input type="checkbox"/>	
F. Is the net impact of the project positive? (total projected tax revenues of economic development less costs of providing services)	<input type="checkbox"/>	<input type="checkbox"/>	
G. Will the project produce desirable jobs in the County?	<input type="checkbox"/>	<input type="checkbox"/>	
H. Will the project rejuvenate an area that needs assistance?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Health/Public Safety			
D. Does the project directly reduce risks to people or property (i.e. flood control)?	<input type="checkbox"/>	<input type="checkbox"/>	
E. Does the project directly promote improved health or safety?	<input type="checkbox"/>	<input type="checkbox"/>	
F. Does the project mitigate an immediate risk?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Impact on Operational Budget			
D. Will the new facility require additional personnel to operate?	<input type="checkbox"/>	<input type="checkbox"/>	
E. Will the project lead to a reduction in personnel or maintenance costs or increased productivity?	<input type="checkbox"/>	<input type="checkbox"/>	
F. Will the new facility require significant annual maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	
G. Will the new facility require additional equipment not included in the project budget?	<input type="checkbox"/>	<input type="checkbox"/>	
H. Will the new facility reduce time and resources of County staff maintaining current outdated systems? This would free up staff and resources, having a positive effect on the operational budget.	<input type="checkbox"/>	<input type="checkbox"/>	
I. Will the efficiency of the project save money?	<input type="checkbox"/>	<input type="checkbox"/>	
J. Is there revenue generating opportunity (e.g. user fees)?	<input type="checkbox"/>	<input type="checkbox"/>	
K. Does the project minimize life-cycle costs?	<input type="checkbox"/>	<input type="checkbox"/>	

6. Regulatory Compliance		
A. Does the project address a legislative, regulatory, or court-ordered mandate? (0 - 5 years)	<input type="checkbox"/>	<input type="checkbox"/>
B. Will the future project impact foreseeable regulatory issues? (5 - 10 years)	<input type="checkbox"/>	<input type="checkbox"/>
C. Does the project promote long-term regulatory compliance? (> 10 years)	<input type="checkbox"/>	<input type="checkbox"/>
D. Will there be a serious negative impact to the County if compliance is not achieved?	<input type="checkbox"/>	<input type="checkbox"/>
E. Are there other ways to mitigate the regulatory concern?	<input type="checkbox"/>	<input type="checkbox"/>
7. Timing/Location		
D. When is the project needed?	<input type="checkbox"/>	<input type="checkbox"/>
E. Do other projects require this one to be completed first?	<input type="checkbox"/>	<input type="checkbox"/>
F. Does this project require others to be completed first? If so, what is magnitude of potential delays (acquisition of land, funding, and regulatory approvals)?	<input type="checkbox"/>	<input type="checkbox"/>
G. Can this project be done in conjunction with other projects: (e.g. waterline/sanitary sewer/paving improvements all within one street).	<input type="checkbox"/>	<input type="checkbox"/>
H. Will it be more economical to build multiple projects together (reduced construction costs)?	<input type="checkbox"/>	<input type="checkbox"/>
I. Will it help in reducing repeated neighborhood disruptions?	<input type="checkbox"/>	<input type="checkbox"/>
J. Will there be a negative impact of the construction and if so, can this be mitigated?	<input type="checkbox"/>	<input type="checkbox"/>
K. Will any populations be positively/negatively impacted, either by construction or the location (e.g. placement of garbage dump, jail)?	<input type="checkbox"/>	<input type="checkbox"/>
L. Are there inter-jurisdictional considerations?	<input type="checkbox"/>	<input type="checkbox"/>
M. Does the project conform to Primary Service Area policies?	<input type="checkbox"/>	<input type="checkbox"/>
N. Does the project use an existing County-owned or controlled site or facility?	<input type="checkbox"/>	<input type="checkbox"/>
O. Does the project preserve the only potentially available/most appropriate, non-County owned site or facility for project's future use?	<input type="checkbox"/>	<input type="checkbox"/>
P. Does the project use external funding or is a partnership where funds will be lost if not constructed?	<input type="checkbox"/>	<input type="checkbox"/>

8. Special Considerations			
A. Is there an immediate legislative, regulatory, or judicial mandate which, if unmet, will result in serious detriment to the County, and there is no alternative to the project?	<input type="checkbox"/>	<input type="checkbox"/>	
B. Is the project required to protect against an immediate health, safety, or general welfare hazard/threat to the County?	<input type="checkbox"/>	<input type="checkbox"/>	
C. Is there a significant external source of funding that can only be used for this project and/or which will be lost if not used immediately (examples are developer funding, grants through various Federal or State initiatives, and private donations)?	<input type="checkbox"/>	<input type="checkbox"/>	

Signatures

Department Director Signature

Department Director Printed Name

County Administrator or CEO Signature

County Administrator or CEO Printed Name