

(Excluding equipment)

Source: “**A Capital Improvement Programming Handbook**”, Government Finance Officers Association.

Instructions for: CAPITAL PROJECT REQUEST (Form B)

Form B requests the basic information required for each department project request. It should be completed for each project whether it is for a new project, project modification, or cancellation of a previously approved project.

1. **Project Title:** Insert title of proposed project.
2. **Purpose of Project Request Form:** Indicate whether the project is a new project, a modification or cancellation.
3. **Department Priority:** Consider all projects being proposed by your department in the same program year. Assign a weight of 100 to the top priority project for each year. Rate all other projects proposed for the same year relative to the top priority project. For example, if projects A (100), B (95) and C (60) were proposed for a program year, the weight of "100" would be placed in Item 3 for project A. Also, in parentheses include the notation (1 of 3) to identify the project as the top priority of three proposed projects.
4. **Location:** Designate the location or boundary limits of the proposed project. If a site is required but has not been selected, this should be indicated; or, if a site is tentative, provide as much accuracy as possible. If not applicable, enter "N/A".
5. **Description:** Explain the nature of the project and indicate whether the project is to replace existing facilities, equipment or land, or is an addition involving an increase in service delivery.

Describe the expected relationships of this project to existing or planned facilities and services, both public and private. Also, summarize the probable impact of the project on the environment or the municipality, if applicable.

The description of land acquisition and construction projects should include dimensions, overall characteristics, unusual conditions, and any other pertinent information.

Include references to any supporting studies or other relevant background information regarding this project.

Attach additional sheets as necessary.

6. **Justification and Useful Life:** Indicate the need for the project and what it is expected to accomplish and its anticipated useful life. Describe its relationship to local, regional, state and federal policies and plans, as well as the requesting department's multi-year plans and program. Explain the priority assigned to this project, and the selection of the time period proposed.

Include any other pertinent information and references to surveys or studies regarding the justification for the project not mentioned in Item 5 above.

7. **Cost and Recommended Sources of Financing:** Insert the appropriate fiscal year for the budget (1st Year) and each program year (2nd through 6th). Then, indicate the proposed project expenditures for each fiscal year in the six-year budget and program; and any expenditures beyond the sixth year (after Sixth Year). If adjustments are made due to inflation, indicate the rate used for this adjustment.

List any recommendations for sources of financing including independent, joint or non-local financing sources. Such sources may include federal, state and regional authorities, the county, adjacent municipalities, civic organizations and private business. If the project's recommended source of financing involves special conditions or requirements, they should be indicated.

8. **Net Effects on Operating Costs:** Indicate the effect of the project on the operating expenditures for each category shown. Estimate the budgetary impact of each change, in dollars, if possible, otherwise indicate the change with a $\pm$ in the project's first year. Changes in operating costs in subsequent years should also be noted if different from first-year changes.

For personnel, show the estimated increase or decrease in the number of employees, and in salary or wage expenses. For purchase of services, show costs related to services received from suppliers, such as contract labor. Identify any entries for “other”. Debt service costs may be computed later by the CIP Committee as an annual debt service cost (principal and interest) over the project's life.

9. **Net Effects on Municipal Income:** Indicate the effect of the project on municipal income in each category shown in terms of an increase or decrease ($\pm$) over the first year of the project's life. If possible, estimate the amount of change in income in subsequent years if substantially different from the first year. Income changes might be due to removal of property from tax rolls; a change in its assessed valuation; a change in fees or rents collected; or other causes.

10. **Submitting Authority:** The department head or other official representative should review, sign and date each **Form B**.

11. **Reserved:** This space is reserved for any notes or comments made by the CIP Committee.

Source: Adapted from a form presented in “*A Capital Improvement Programming Handbook*”, Government Finance Officers Association.

FORM C

CAPITAL PROJECT REQUEST FOR EQUIPMENT PURCHASE OR MAJOR RENTAL

Department & Activity _____			Date Prepared _____		
Contact Person _____			Phone Number _____		

1. Project Title & Reference No. 2. Form of Acquisition (check appropriate) _____ Purchase _____ Rental 3. Number of Units Requested 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. week	4. Cost <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">Per Unit</th> <th style="width: 20%; text-align: center;">Total</th> </tr> </thead> <tbody> <tr> <td>Purchase price</td> <td></td> <td></td> </tr> <tr> <td>or annual rental \$</td> <td></td> <td>\$</td> </tr> <tr> <td>Plus: Installation</td> <td></td> <td></td> </tr> <tr> <td>or other costs \$</td> <td></td> <td>\$</td> </tr> <tr> <td>Less: Trade-in or</td> <td></td> <td></td> </tr> <tr> <td>other discount \$</td> <td></td> <td>\$</td> </tr> <tr> <td>Net purchase Cost</td> <td></td> <td></td> </tr> <tr> <td>or annual rental \$</td> <td></td> <td>\$</td> </tr> </tbody> </table> 6. Number of Similar Items in Inventory _____ 7. Estimated Use of Requested Item(s) _____ Weeks per year _____ Approx. months (if seasonal) For the weeks used, estimate: _____ Average days per _____ Average hours per day used Estimated useful life in years _____		Per Unit	Total	Purchase price			or annual rental \$		\$	Plus: Installation			or other costs \$		\$	Less: Trade-in or			other discount \$		\$	Net purchase Cost			or annual rental \$		\$
	Per Unit	Total																										
Purchase price																												
or annual rental \$		\$																										
Plus: Installation																												
or other costs \$		\$																										
Less: Trade-in or																												
other discount \$		\$																										
Net purchase Cost																												
or annual rental \$		\$																										

8. Replaced item(s)					
Item	Make	Age	Prior Year's		
			Maint. Cost	Breakdowns	Rental Cost
A.					
B.					
C.					
D.					
E.					

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

10. Submitting Authority	
Submitted by _____	Date _____
(signature)	
Position _____	

11. Reserved

Source: Adapted from a form presented in “*A Capital Improvement Programming Handbook*”, Government Finance Officers Association.

**Instructions for: CAPITAL PROJECT REQUEST FOR
EQUIPMENT PURCHASE OR MAJOR RENTAL (Form C)**

This form, which is presented as **Form C**, should be included if the capital project is an independent equipment purchase or major rental.

1. **Project Title: Insert** title of proposed project.
2. **Form of Acquisition: Check** appropriate category.
3. **Number of Units Requested:** Indicate the total number of units to be rented or purchased.
4. **Cost:** Provide cost data requested.
5. **Purpose of Expenditure:** Check the appropriate reasons for this expenditure.
6. **Number of Similar Items in Inventory:** Indicate and list the number of similar equipment items in the inventory of the requesting department.
7. **Estimated Use of Requested Item(s):** Indicate the number of weeks per year the item is expected to be used and the approximate months of the year, if seasonal, and estimate the average usage (in days per week and in hours per day) for the specified period. Also show estimated useful life of the item based on planned usage.
8. **Replaced Items:** Provide the information indicated for any municipally owned or rented item(s) that will be replaced by the request item(s). If there are no items replaced, enter N / A.
9. **Recommended Disposition of Replaced Items:** Self-explanatory.
10. **Submitting Authority: The** agency head or other official representative should review, sign and date each form.
11. **Reserved:** This space is reserved for any notes or comments made by the CIP Committee.

Source: Adapted from a form presented in *“A Capital Improvement Programming Handbook”*, Government Finance Officers Association.

FORM D

CAPITAL IMPROVEMENT PROGRAM DETAILED PROJECT DESCRIPTION

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

A. IDENTIFICATION & CODING INFORMATION

1. Date _____

2. Project Name _____

3. Program _____ 4. Department _____

B. EXPENDITURE SCHEDULE (000'S)

	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)
Cost		Thru	Estimate	Total	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Beyond
Elements	\$ Total	FY	FY	6 Years	FY	FY	FY	FY	FY	FY	6 Years
Planning											
Design &											
1. Supervision											
2. Land											
Site Improvements											
3. & Utilities											
4. Construction											
Furniture &											
5. Equipment											
6. Total											

C. FUNDING SCHEDULE (000'S)

GO Bonds	
State Aid	

D. DESCRIPTION & JUSTIFICATION

E. ANNUAL OPERATING BUDGET IMPACT (000's)

F. MAP Reference Code:

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

Source: Adapted from a form presented in “
Finance Officers Association.

”, Government

FORM E

CAPITAL IMPROVEMENT RATING SHEET

Project Name: _____

Estimated Cost: _____

Major Considerations

Score Range

A. Town Department Priority Classification

- | | |
|-----------------------|----|
| 1. Mandatory | 10 |
| 2. Maintenance | 7 |
| 3. Improve Efficiency | 5 |
| 4. New Service | 2 |

B. Priority Ranking

- | | |
|--------------|----|
| 1. Very high | 10 |
| 2. High | 7 |
| 3. Medium | 5 |
| 4. Low | 2 |

C. Project's Expected Useful Life (Three years or less score zero)

- | | |
|---------------------|----|
| 1. 20 or more years | 10 |
| 2. 10 - 19 years | 5 |
| 3. 5 - 9 years | 2 |

D. Effect on Operating & Maintenance Costs

- | | |
|-------------------|----|
| 1. Reduce Cost | 10 |
| 2. Cost Unchanged | 5 |
| 3. Increase Cost | 2 |

E. Effect on Town's Revenue (tax base)

- | | |
|-----------------------|----|
| 1. Increase Revenues | 10 |
| 2. Revenues Unchanged | 5 |
| 3. Decrease Revenues | 2 |

F. Availability of State / Federal Grant Moneys (If no, score zero)

- | | |
|--------|---|
| 1. Yes | 5 |
|--------|---|

TOTAL SCORE

Adapted from ***“Developing a Capital Improvement Program”***, Metropolitan Council of the Twin Cities Area.

Instructions for: CAPITAL IMPROVEMENT RATING SHEET (Form E)

This rating sheet has six major considerations that will be used for the purpose of ranking projects on the town's CIP program.

Every project will receive a point score in each of the six major considerations. The points will be totaled and used to establish a priority ranking on the CIP program.

A. Department Priority Classification

The rater must determine which priority classification a project fits under.

1. Mandatory - Refers to the protection of life or maintenance of public health and safety, **or legally required**³.
2. Maintenance - Refers to a continuation of public services, the conservation of endangered resources, or the finishing of partially completed projects.
3. Improve Efficiency - Refers to the replacement of obsolete facilities or the improvement of community facilities.
4. New Service - Refers to the expansion of the public facilities service area of the town, or the provision of new public services.

B. Priority Ranking

Enter policy area priority from cover sheet.

C. Project's Expected Useful Life

Refer to Form B (Item 6) or Form C (Item 7).

D. Effect on Operating and Maintenance Costs

Refer to Form B (Item 8) or Form C (Item 4).

E. Effect on Town's Revenue Capital (Capital Project Requests Only)

Refer to Form B (Item 9).

F. Availability of State / Federal Grant Moneys

Total Score

Total the scores for A - F.

³ Last phrase was inserted by Department of Revenue.

FORM F

CAPITAL IMPROVEMENT PROGRAM MUNICIPAL PROJECT SUMMARY

Department	Project	Project No.	Total Estimated Expenditure	Current Year	1st Year	2nd Year	3rd Year	4th Year	5th Year
Health	Mosquito control	1-7101	\$ 75,000	\$ 30,000	\$10,000	\$ 10,000	\$ 10,000	\$10,000	\$ 5,000
Health	Landfill bulldozer	1-7102	10,000	8,000	2,000				
DPW	Storm drainage	2-7101	30,000	10,000	10,000			10,000	
DPW	Curb construction	2-0707	60,000	20,000	40,000				
DPW	Dump truck	2-7701	20,000		10,000	10,000			
DPW	Steam cleaner	2-7401	6,000				6,000		
Parks	Land acquisition (land)	3-7101	25,000	25,000					
Parks	Site preparation & Bldg.	3-701	225,000	100,000	125,000				
Public Safety	Fire Engine	4-7101	20,000	20,000					
Public Safety	Equipment truck	4-7301	5,000			5,000			
Public Safety	New headquarters	4-7401	75,000				50,000	25,000	
Sub-total Municipal			551,000	213,000	197,000	25,000	66,000	45,000	5,000
Schools	3 Jr. School expansion	5-7821	2,000,000			500,000	500,000	500,000	500,000
Schools	New Sr. High	5-7302	3,000,000		1,000,000	2,000,000			
Sub-Total Schools			5,000,000		1,000,000	2,500,000	500,000	500,000	500,000
Sewer Utility	Extension of Sewer System		3,500,000				1,500,000	1,500,000	500,000
Total Expenditures			9,051,000	213,000	1,197,000	2,525,000	2,066,000	2,045,000	1,005,000
Funding Summary:									
	General Obligation Bonds		4,500,000	213,000	146,000	525,000	1,066,000	1,545,000	1,005,000
	State Aid		3,500,000		1,000,000	2,000,000	500,000		
	Federal Aid		1,000,000				500,000	500,000	
	Gifts		51,000		51,000				
Total Funding			9,051,000	213,000	1,197,000	2,525,000	2,066,000	2,045,000	1,005,000