CAPITAL PROJECT APPROPRIATION REQUEST PART B - PROJECT OVERVIEW

STATE AGENCY (OR INSTITUTION): PROJECT TITLE AND LOCATION:

AGENCY RANK:

Section I. Project Type

- New Construction
- _____ Addition, Renovation, or Replacement of Existing Facility
- _____ Major Maintenance, Renovation, or Repair
- _____ Deferred Maintenance
- _____ Equipment Only
- _____ Energy Related
- ____ Other(Specify):

Section II. Project Purpose

_____ Improvement or Expansion of Exisiting Programs New Program

Section III. Propriety (For new construction projects)

The agency certifies that new construction is the most appropriate and cost effective method of addressing the need for this project, in lieu of repair/renovation of exisitng facilities.

Section IV. Project History

- ____ Has this project been previously requested? Date Requested (If applicable) :
- _____ Was this project recommended by the Governor?
- Was this project recommended by the General Assembly?

Section V. Project Timetable

Section VI. Project Life(in years)

Estimated useful life of facility: Estimated useful life of fixed equipment:

Section VII. Project Support Requirements

- _____ Site Currently owned
- _____ Site to be acquired
- Utilities available
- _____ Access available
- Parking available for vehicles

Section VIII. Project Usage

__Will this project be used by other State (Public) Agencies? (if no, explain):

Income to be generated during the first year of Operation (If applicable):

Section IX. Project Planning

____Have plans been prepared for this project? Explain:

Date plans prepared:

Section X. Purpose - ABA Review

- ____Is this part of agency's long range capital plan?
 - If yes, explain how the project relates to the agency's plan:

If no, explain why this project has become an agency priority:

CAPITAL PROJECT APPROPRIATION REQUEST PART C - PROJECT DESCRIPTION/JUSTIFICATION

PROJECT TITLE & LOCATION:

CAPITAL PROJECT APPROPRIATION REQUEST PART D - COST OF PROJECT, METHOD OF FINANCING

PROJECT TITLE & LOCATION:

Section I. Estimated Project Costs (A1) New Building Construction Costs Based on ______sq. ft @ est. cost/sq. ft (A2) Renovated Building Construction Costs: Based on_____sq. ft @ _est. cost/sq. ft (B) Built-in Equipment: (C) Architectural & Engineering Fees: % of Construction Costs (D) Contingency Fee: _% of Construction Costs (E) Moveable Equipment, Furnishings, & Exhibits: (F) Repairs & Major Maintenance Costs: TOTAL BASE COSTS: (G) Other Costs (Items 1,3, & 5 are Reimbursable Expenses on Professional Services Contracts) (1) Advertising: (2) Land and Right of Way Acquisition Costs: (3) Site Survey, Soil Borings, and Testing: (4) Site Improvements: (5) Other (specify): **TOTAL OTHER COSTS:** Section II. Method of Financing Source of Funds: State Cash Federal Bond Proceeds Other (Specify) **TOTAL FUNDING:**

Section III. Anticipated Facility Operations

	2019-2020	2020-2021	2021-2022	2022-2023
Personal Services				
Number of Positions				
Maintenance & Operations				
Utilities				
TOTAL				

Section IV. Operating Fund Sources

	2019-2020	2020-2021	2021-2022	2022-2023
General Revenue				
Cash				
Federal				
Special Revenue				
Other				
TOTAL				