



CAPITAL IMPROVEMENT PROJECT (CIP) REQUEST - FY20
FORM A - DESIGN & CONSTRUCTION

Project Title: _____
Project Address: _____
Department: _____
Project Mgr.: _____ **Email:** _____
New Project or Modification:

Department Priority:

Rank your project(s) in order of priority from your point of view. If you propose four projects, rank them 1, 2, 3, 4, with 1 being the highest, and so forth.

Project Description/Scope of Work:

Justification:

Relationship to Other Projects:

Category: Please check all appropriate boxes

- Architectural/Engineering Feasibility Study
- Architectural/Engineering Construction Document Services & Construction Admin
- Building Alteration/Repair/Renovation/Addition/New Construction
- Building Improvements (non-construction)
- Purchase of Equipment (incl. vehicles, office equipment, hardware, etc.)
- Information Technology Systems/Platforms (e.g. cloud based, internet based, etc.)
- Street/Sidewalk/Monument Improvements
- Water Improvements
- Sewer Improvements
- Land Development
- Land Acquisition
- Land Disposition
- Parks and Open Space
- Other

Operational Impact:

What impact will this project have on operational costs?

- Reduce Cost (greater than 5%)
- Reduce Cost (less than 5%)
- Cost Unchanged
- Increase Cost (less than 5%)
- Increase Cost (greater than 5%)

Design and Construction Project Funding

	Total Estimated Cost	Prior Years Funding	FY 20	FY 21	FY 22	FY 23	FY 24
Capital Costs:							
Feasibility Study	\$ -						
Land Acquisition/Appraisal	\$ -	-	-	-	-	-	-
Environmental Remediation/LSP	\$ -						
Demolition & Site Clearance	\$ -	-	-	-	-	-	-
Owner's Proj. Mgr./Clerk of the Works	\$ -						
Designer Services (SD through CA)	\$ -						
Construction	\$ -	-	-	-	-	-	-
Insurance (builder's risk, addtl. Polices)	\$ -	-	-	-	-	-	-
Furniture & Equipment (FFE)	\$ -						
Police Details	\$ -	-	-	-	-	-	-
Contingency	\$ -						
Other (Specify)	\$ -	-	-	-	-	-	-
Other (Specify)	\$ -	-	-	-	-	-	-
Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Please describe how you developed these cost estimates. Include references to any supporting appraisals, studies, or other relevant background information that bolsters the cost estimates. How long is tge estimate valid? Have you retained the services of an independent cost estimator?

Please provide suggested sources. This section will be finalized jointly by Finance and the Department.

		Prior Years Funding	FY 20	FY 21	FY 22	FY 23	FY 24
Funding Sources:							
Stabilization Fund	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
GO Bonds	\$ -	-	-	-	-	-	-
Retained Earnings	\$ -						
General Fund	\$ -						
Special Assmnt.	\$ -	-	-	-	-	-	-
Ch. 90	\$ -						
Grants	\$ -	-	-	-	-	-	-
Receipts Reserved	\$ -						
Other (Specify)	\$ -	-	-	-	-	-	-
Other (Specify)	\$ -	-	-	-	-	-	-
Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Evaluation Committee Use Only:

Reviewed and Approved By:

Requesting Department

Auditing

Purchasing

Date

Date

Date

Final Approval

Version

Draft

Revised

Accepted



CAPITAL IMPROVEMENT PROJECT (CIP) REQUEST - FY20
FORM B - EQUIPMENT & ASSETS

Equipment Requested: Trucks (5) and Equipment (8)

Department: Parks and Recreation

Project Mgr.: Ron Bonney **Email:** rbonney@somervillema.gov

New Project or Modification: New Project

Department Priority: Necessary First

Rank your project(s) in order of priority from your point of view. If you propose four projects, rank them 1, 2, 3, 4, with 1 being the highest, and so forth.

Equipment/Asset Description:

Two F350 full size Pick Ups with Plows and Sanders, one Rack Truck, one F350 Dump Truck with Plow and Sander, one Cargo Van, and a Trailer. 2 John Deere 1585 TC Mowers, Tractor, Bunker Rake with Sand Pro, John Deer 1600, Vac and Blower attachments (these are powered via PTO to reduce sound).

Justification:

Parks & Recreation needs the required equipment to appropriately manage athletic fields and facilities. This includes but not limited too; snow removal, mowing, athletic field preparation, grooming, and ongoing maintenance. All equipment directly impacts the Department's ability to manage athletic fields and facilities.

Relationship to Other Projects:

Operational Impact:

With the increase in vehicles and equipment that will engage in high hour usage, we would recommend an increase in budget line 524003 by 13k for year one and 18k in the outlying years. Line currently funded at 2,000.00.

What impact will this project have on operational costs?

- Reduce Cost (greater than 5%)
- Reduce Cost (less than 5%)
- Cost Unchanged
- Increase Cost (less than 5%)
- Increase Cost (greater than 5%)

	FY20	FY21	FY22	FY23	FY24
Average Annual Repair Costs	\$ 15,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 25,000
Average Annual Maintenance Costs	-	-	-	-	-
Other (Specify)	-	-	-	-	-
Implementation	-	-	-	-	-
Other (Specify)	-	-	-	-	-
Total:	\$ 15,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 25,000

Estimated useful life: 10 Years

Cost Per Unit: **# of Units Requested:** \$ 13.00 **Total Cost:** 486,804.86

Published bids for each vehicles, up-fitting via state contract, purchase of other equipment via state contracts using best bus

see other side

Equipment Being Replaced (if any):

	Item	Make	Age	Avg. Maint. Cost	Avg Repair Costs	Rental Cost
A.	M5	1998	22	3,700		
B.	Rec 1	1995	25	5,000		
C.						
D.						
E.						

Recommended disposition of items being replaced:

Trade in.

Evaluation Committee Use Only:

Reviewed and Approved By:

Requesting Department	
Auditing	
Purchasing	

Date	
Date	
Date	
Final Approval	

Version	
Draft	
Revised	
Accepted	

New Project
Modification
Third
Fourth
Fifth
Sixth
Seventh
Eighth
Ninth
Tenth

Urgent
Necessary
Desirable