



CAPITAL IMPROVEMENTS PROGRAM BUDGET WORKSHEET
2015 / 2016
Project Information Sheet

This form MUST be completed for each project requested for funding in the 2015-2016 Capital Budget. Use a separate form for each project, and please prioritize each project 1 through X, with 1 representing your highest priority and X the lowest.

Department Name:	Monroe Multi-Sports Complex
Priority Ranking:	
Project Title:	Electric Scissor Lift
Quantity (if applicable):	
Project Useful Life:	5 + Years
Cost Estimates:	Current FY Project Request: \$10,000.00 Prior Funding: \$0.00 Total Project Cost: \$10,000.00
Projected Schedule of Purchase:	FY 2015-2016
Source of Funding:	General Funding or Building Authority Funds
Purpose of Expenditure:	To Allow the MMSC Staff to repair Lights, and other items that have a height greater then safety usage of a ladder.
Project Justification:	Repair of equipment and items that are at a height.
Projected Budget Impact:	Cost of \$10,000.00

Check those items that apply:

Type of Project:	<input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Vehicle <input type="checkbox"/> Project
Status of Request:	<input checked="" type="checkbox"/> New Request <input type="checkbox"/> Funding Requested in Prior Year
Status of Item or Project:	Replacing Existing Equipment, Vehicle, Etc. <input checked="" type="checkbox"/> Equipment, Vehicle, Etc. that is New to the City

Please answer the following questions related this request.

1. Has this project been requested previously? If so, when? Was funding awarded? If yes, how much?
No. This is a new project
2. Description and function of new capital item:
Purchase of an Electric Scissor Lift will allow staff to safely replace or fix items too high to safely repair with a ladder.
3. Why is this item needed? Why does the City need to provide this service?
Currently we rent a scissor lift when needed. Due to the cost to rent this piece of equipment MMSC staff tend to wait for a couple of items to be able to replace or repair equipment. This will allow us to repair items in a more timely manner.

4. Explain new or improved service that will result from new item and impact on your department's performance or services provided:

Ability to repair or replace items in a more timely manner.

5. What will be the operating budget cost or savings? (List costs/savings for personnel, supplies, and other charges separately).

Cost for the purchase of this item.

6. Does the proposed project comply with the City's Comprehensive Plan?

7. Are there other alternatives to the proposed item or request? (E.g., lease vs. buy, repair rather than replace, share with other governmental jurisdictions, etc.)

Possible usage by DPS for other projects in the city.

8. How is the cost proposed to be funded? Are there alternative sources of funding? (E.g., donations, millages, special assessments, grants, etc.)

There are no additional alternatives for funding at this time.

9. Are there opportunities to share costs and services with other governmental units within the region?

10. Insert a photo/drawing, or cut-sheet of the site or equipment if available.

11. For fixed projects, include a map of the project location if applicable and/or appropriate.