Town of Tuftonboro Capital Improvements Program FY 2012-2021
CIP Request Form Worksheet

A Capital Project is defined as an activity with a cost of $10,000 or more and with a useful life of two years or more.

Department:
Contact Name:
Phone:
Email:

Project Title:
Estimated Total Cost:
Estimated Useful Life (years):
Estimated Non-Tax Funding:

☐No Capital Project plans at this time

Previously Presented? ☐Yes ☐ No

Type of Project: (check one)

☐Building Renovation ☐Building Addition/New Construction ☐Property/Rights Acquisition ☐Vehicle ☐New Equipment

☐Equipment Replacement ☐Equipment Lease ☐Road Improvements ☐Professional Consultation ☐Other

Reason/s for Request: (check all that apply)

☐Safeguards public health or safety
☐Responds to Federal or State requirements
☐Provides added capacity to serve growth
☐Provides incentive to economic development
☐Continues existing project
☐Alleviates substandard conditions or deficiencies
☐Improves quality of existing services/infrastructure
☐Reduces long- term operating costs
☐Responds to public demand
☐Reflects Master Plan

Project Description and Justification: (Please include how this project ties in with the Master Plan)

Project Priority: (check one)

☐1 Cannot be delayed for health, safety, or ADA compliance ☐2 Needed within 5 years to maintain basic quality/level of service/infrastructure
☐3 Needed within 5-10 years to improve quality/ level of service/infrastructure ☐4 Can hold for 10+ years, but supports community development goals
☐5 Needs more research, planning, and coordination

Proposed Funding: (check all that apply)

☐General Fund (current property taxes) ☐Capital Reserve Fund ☐Lease/Purchase ☐User Fees
☐Bond Issue ☐Bank Financing ☐Grant/s ☐Donations ☐Other (specify)_____

Projected Expenditures by Year:

20__	20__	20__	20__	20__	20__	20__	20__	20__	20__