CAPITAL IMPROVEMENT PROGRAM (CIP) AMENDMENT FORM

- **1. Contact Person/Department:** Steve Claassen, Facilities, Fleet and Parks Director
- 2. Project Title: Lobby Gun Lockers
- **3. Request Status:** New Project (complete items 5, 6, 7 and 8)

4. Justification for changes from the approved CIP Project:

Year Approved	Original Budget	Requested Change	Revised Total
Justification of requ	uested changes:		

5. Justification: Discuss the need for the project, how it will improve delivery of services, and improve efficiency, along with the scope of capital work to be completed. Please address the urgent need of this project and what qualifies this project to be reviewed outside of the CIP budget process. Please summarize below, if additional space is needed, then provide the detailed narrative in CIP Attachment Form A.

Justification of new project:

Kansas allows concealed or open carry by anyone that can legally possess a firearm; however the carrying of a firearm in any county courthouse is unlawful if the Courthouse has adequate security measures. Sedgwick County Courthouse does not allow for weapons to be in the building unless carried by a commissioned law enforcement officer. As such, there is no place to secure a weapon when visitors come to the County Courthouse. This project would include the installment of a gun locker in the NE corner of the County Courthouse lobby and allows visitors to check their weapon in a secured locker while doing business in the County Courthouse.

This project would include new aluminum frames matching the design of the existing curtain wall and will be used to enclose the gun locker space. The existing glass in the exterior walls will be removed and replaced with bullet resistant glass capable of stopping a .357 magnum discharge. The height of the new enclosure will protect staff and visitors that may be in the lobby or on the mezzanine. These measures will minimize injury or damage that could be caused by an accidental discharge of a weapon being stowed.

6. Cost and Funding: Outline all project costs, by appropriate project phase, based on the anticipated schedule. Select below the table who developed the estimate and when. A dated, written copy of the estimate must be attached. Then, select the funding source and provide a brief explanation of how the project will be funded, and explanation if selecting "other".

Project Phase	2016	2017	2018	2019	2020	Total
Planning						
Design	\$5,400					
Construction	\$58,918					
Equipment						
Total	\$64,318					

7. Estimate Developed By: Check all that apply

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Facility Project Services	Architect / Engineering Firm	Vendor	Department
Х	Х		

Funding Type and Proposed Fund Source: Cash

CIP Reserve Fund

8. Operating Budget Impact: Budget Impact (detailed below)

Outline estimated operating impacts occurring as a result of this project. Below the table, discuss these operating impacts and funding strategy. Be sure to seek expert assistance when appropriate.

Operating Impact	2016	2017	2018	2019	2020	Total
Total Revenue						
Personnel						
Contractual						
Commodities						
Equipment						
Total Expenses						
FTE(s)						

9. CIP Committee Recommendation: Recommended

10. Agenda Recommendation: Regular Agenda

Approved Mike Scholes

9/20/18 Date

Consent

x Regular Agenda