

CAPITAL IMPROVEMENT PROGRAM (CIP) AMENDMENT FORM

1. **Contact Person/Department:** Tania Cole, Facilities Maintenance and Project Services
2. **Project Title:** Adult Detention Facility 1st Floor Remodel & Addition and Courthouse Space

3. **Request Status:** Previously Approved Project (complete items 4 and 7)

4. **Justification for changes from the approved CIP Project:**

Year Approved	Original Budget	Requested Change	Revised Total
2019	\$5,497,094	\$100,000	0

Justification of requested changes:

This project has been approved in the 2019 CIP however, to get this design process underway immediately budget authority is needed for any expenditures this year. It is expected that \$100,000 should be sufficient to cover architectural and engineering fees completed this year. This will not require funding but will be reimbursed by bond funds in 2019.

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.

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- 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						
Construction						
Equipment						
Total						

- 7. Estimate Developed By:** *Check all that apply*

Date: August 16, 2018

Facility Project Services	Architect / Engineering Firm	Vendor	Department
x	X		

Funding Type and Proposed Fund Source: Cash

N/A

- 8. Operating Budget Impact:** No Budget Impact

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)						

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9. CIP Committee Recommendation: Choose an item.

10. Agenda Recommendation: Choose an item.

Mike Scholes

Date

☐

Consent

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Regular Agenda