

PROJECT REQUEST FORM

PROJECT TITLE:
 DEPARTMENTAL RESPONSIBILITY:
 DESCRIPTION:

[insert map here]

JUSTIFICATION:

COMPLIANT WITH COMPREHENSIVE PLAN AND/OR OTHER MASTER PLAN?

YES NO

EXPENDITURE SCHEDULE (\$000s)

PROJECT ELEMENT	TOTAL	THRU 2010	2011	2012	2013	2014	2015	BEYOND 2015
PLANNING								
DESIGN								
LAND								
CONSTRUCTION								
EQUIPMENT								
OTHER								
TOTAL	\$ -	0	0	0	0	0	0	0

OPERATIONAL IMPACT (\$000s)

PROJECT ELEMENT	TOTAL	THRU 2010	2011	2012	2013	2014	2015	BEYOND 2015
MAINTENANCE COSTS								
PERSONNEL COSTS								
TOTAL	\$ -	0	0	0	0	0	0	0

FUNDING SCHEDULE (\$000s)

SOURCE	TOTAL	THRU 2010	2011	2012	2013	2014	2015	BEYOND 2015
G. O. BONDS								
SPECIAL ASSMT.								
REVENUE BONDS								
CURRENT REV.								
FEDERAL AID								
STATE AID								
EX. BONDS								
OTHER								
TOTAL	\$ -	0	0	0	0	0	0	0

COMMENTS:

PROJECT SCORE (to be completed by Administrative Review Committee):