

	<b>PORT OF MILWAUKEE</b>	2011	2012	2013	2014	2015	2016	Total
	<b>PROJECT DESCRIPTION</b>	Budget	Budget	Budget	Budget	Budget	Budget	6 Year
		Plan	Plan	Plan	Plan	Plan	Plan	Plan
Rk								
8	Port Facilities Systems		\$ 100,000		\$ 100,000		\$ 100,000	\$ 300,000
9	Rehab Electrical Svc. So. Harbor Tract			\$ 100,000				\$ 100,000
3	Dockwall & Breakwater Rehabilition	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000	\$ 900,000
7	Harbor Maintenance Dredging	\$ 150,000		\$ 150,000		\$ 150,000		\$ 450,000
4	New Crane		\$ 4,000,000					\$ 4,000,000
6	Analyze and Upgrade Sewer System	\$ 75,000		\$ 200,000		\$ 200,000		\$ 475,000
2	Pier, Berth and Channel Improvements	\$ 200,000	\$ 200,000	\$ 200,000	\$ 200,000	\$ 200,000	\$ 200,000	\$ 1,200,000
	*****Grant & Aid*****	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000	\$ 4,800,000
5	Rail Track & Service Upgrades		\$ 100,000		\$ 100,000			\$ 200,000
10	Confined Disposal Facility Expansion		\$ 75,000		\$ 75,000		\$ 75,000	\$ 225,000
11	Port Security		\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 500,000
1	Roadway Paving	\$ 100,000	\$ 100,000		\$ 100,000			\$ 300,000
12	Energy Initiatives		\$ 100,000		\$ 100,000		\$ 100,000	\$ 300,000
13	Terminal Resurfacing			\$ 125,000		\$ 125,000		\$ 250,000
	<b>Total Port of Milwaukee Projects</b>	\$ 1,475,000	\$ 5,725,000	\$ 1,825,000	\$ 1,725,000	\$ 1,725,000	\$ 1,525,000	\$ 14,000,000
	<b>Total Grant &amp; Aid</b>	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000	\$ 800,000	\$ 4,800,000
	<b>Total City Funding</b>	\$ 675,000	\$ 4,925,000	\$ 1,025,000	\$ 925,000	\$ 925,000	\$ 725,000	\$ 9,200,000

# Capital Improvement Request Form Part I

Project/Program Title: Roadway Paving Requesting Department: Port of Milwaukee  
 Prepared By/Phone Ext: Hattie Billingsley / x-3649 Department Head Signature: *Eric Rivett*  
 Account No: \_\_\_\_\_

A) Department Priority 1 of 13 Useful Life 20 Years Level of Need  Essential  Important  Desired  
 Type of Project  New  Replacement  Repair  On-Going Program  
 Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**  
 Street Related  Sewer  Water  Street Lighting  Communications  Recreation  
 Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**  
 Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility  
 ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**  
 Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No  
 On-Going Program  Yes  No  
 Multi-Year  Yes  No Number of Years 4

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries \$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

E) In Six Year Capital Improvement Plan  
 Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification  
 A number of roadways on the South Harbor tract are in deplorable condition due to the high volume of heavy trucks which do regular business with the tenants of the Port. These roadways are generally not public thoroughfares and therefore have not been maintained by DPW on a regular basis. The Port, as custodian of the City's properties on Jones Island, along with DPW, agree the roadways on the South Harbor tract are in dire need of resurfacing. This funding is requested to provide for paving of fire lanes and access roads on the South Harbor tract.

G) Additional Comments  
 Funding for the public roads will be provided by the wheel tax. DPW is expected to begin work on Jones Island public streets in 2010. This funding will complete the service drives on Jones Island which are not public roads and therefore not eligible to be paid for with funds from the wheel tax.

## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Roadway Paving

Account No: \_\_\_\_\_

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request	\$100,000					\$100,000
2012 Projection	\$100,000					\$100,000
2013 Projection						\$0
2014 Projection	\$100,000					\$100,000
2015 Projection						\$0
2016 Projection						\$0
<b>Total Six Year Cost</b>	\$300,000	\$0	\$0	\$0	\$0	\$300,000
<b>Total Project Cost</b>	\$300,000	\$0	\$0	\$0	\$0	\$300,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

Available Cost Estimate:	2011	2012	2013	2014	2015	2016
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: 01/01/11

Estimated Completion Date: On-going

Department Head Signature Eric Bennett

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

**Project/Program Title:** Pier, Berth and Channel Improvements      **Requesting Department:** Port of Milwaukee  
**Prepared By/Phone Ext:** Hattie Billingsley / x-3649      **Department Head Signature:** *Eric Bennett*  
**Account No:** PT180000200

**A) Department Priority** 2 of 13      **Useful Life** 50 Years      **Level of Need**     Essential     Important     Desired  
**Type of Project**     New     Replacement     Repair      **Project/Program Scope**     Fully Defined     Partially Defined  
 On-Going Program

**B) Description**  
**Infrastructure**  
 Street Related     Sewer     Water     Street Lighting     Communications     Recreation  
 Sidewalks     Alleys     Bridge     Environmental     Port     Parking  
**Building**  
 Roof     Windows     HVAC     Electrical     Restroom     Security     Exterior     Entire Facility  
 ADA     Office Remodeling     New Building     Elevators     Garage     Mechanical  
**Miscellaneous Development**  
 Economic     Information Systems     Equipment     Other

**C) Project/Program Duration**  
 One Year             Yes     No  
 On-Going Program     Yes     No  
 Multi-Year             Yes     No      **Number of Years** \_\_\_\_\_

**D) Total Positions** 0      **Total FTEs** \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries \$
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

**E) In Six Year Capital Improvement Plan**  
 Yes     2009-2014     2010-2015       Yes, Modified       New Request

**F) Project/Program Justification**  
 The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. It is vital to this mission that the Port's infrastructure is maintained in excellent condition. Funding is needed on an on-going basis for improvements to the mooring basin, the City's heavy lift dock and the outer harbor. This program is funded in part by a grant program through the Department of Transportation's Bureau of Railroads and Harbors. Approximately 80% of the cost of these improvements will be paid by the grant with the City providing 20% of the total funding. This account is used for the City's 20% matching funds for eligible projects.

**G) Additional Comments**  
 Currently the Port is looking at two projects which may qualify for the state grant program. One is for improvements of the City's heavy lift dock and the other project is a Barge Transfer facility on Jones Island. The Port will also continue to investigate receiving grant funding for the purchase of a new crane for use on Jones Island.

## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Pier, Berth and Channel Improvements

Account No: PT180000200

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request	\$200,000	\$800,000				\$1,000,000
2012 Projection	\$200,000	\$800,000				\$1,000,000
2013 Projection	\$200,000	\$800,000				\$1,000,000
2014 Projection	\$200,000	\$800,000				\$1,000,000
2015 Projection	\$200,000	\$800,000				\$1,000,000
2016 Projection	\$200,000	\$800,000				\$1,000,000
<b>Total Six Year Cost</b>	<b>\$1,200,000</b>	<b>\$4,800,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,000,000</b>
<b>Total Project Cost</b>	<b>\$1,200,000</b>	<b>\$4,800,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,000,000</b>

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

<b>Available Cost Estimate:</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Based on Cost of Similar Projects	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature *Eric Pennett*

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: Dockwall & Breakwater Rehabilitation Requesting Department: Port of Milwaukee  
 Prepared By/Phone Ext: Hattie Billingsley / x-3649 Department Head Signature: Sara Keimett  
 Account No: PT18080110

A) Department Priority 3 of 13 Useful Life 50 Years Level of Need  Essential  Important  Desired  
 Type of Project  New  Replacement  Repair Project/Program Scope  Fully Defined  Partially Defined  
 On-Going Program

B) Description

**Infrastructure**  
 Street Related  Sewer  Water  Street Lighting  Communications  Recreation  
 Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**  
 Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility  
 ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**  
 Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No  
 On-Going Program  Yes  No  
 Multi-Year  Yes  No Number of Years \_\_\_\_\_

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan  
 Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification

The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. It is vital to this mission that Port's infrastructure is maintained in excellent condition. The Port of Milwaukee maintains an extensive (ten mile) dockwall system to serve the Port area. An on-going planned dockwall rehabilitation program is necessary to avert costly emergency repairs and to maintain the dockwall in appropriate condition for cargo operations. This program allows the Port's dockwalls to be well maintained for lease and cargo operations. Well maintained dockwalls are essential to the Port's continued successful operation and its ability to meet the objectives of the mission statement. Lease documents often require the city to maintain dockwalls for its tenants. Loss of revenue to the city may result if the dockwalls are not kept in a safe and useable conditions.

G) Additional Comments

In each of the years 2008 and 2009 the Port had a major dockwall collapse which necessitated emergency dockwall repairs. The 2008 collapse was due to storm damages. FEMA funds were obtained to offset the damages. In 2009 a truck caused major damage to the dockwall due to a watermain break after the truck hit a hydrant on the island. The Port recovered about 80% of the damages from the trucker's insurance company. The emergencies have disrupted the Port's planned routine maintenance schedule and used up 86% of the capital authority.

## Capital Improvement Request Part II

**Requesting Department:** Port of Milwaukee

**Project/Program Title:** Dockwall & Breakwater Rehabilitation

**Account No:** PT18080110

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request	\$150,000					\$150,000
2012 Projection	\$150,000					\$150,000
2013 Projection	\$150,000					\$150,000
2014 Projection	\$150,000					\$150,000
2015 Projection	\$150,000					\$150,000
2016 Projection	\$150,000					\$150,000
<b>Total Six Year Cost</b>	<b>\$900,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$900,000</b>
<b>Total Project Cost</b>	<b>\$900,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$900,000</b>

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

<b>Available Cost Estimate:</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature *Eric Penitt*

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: New Crane/Heavy Lift Equipment Requesting Department: Port of Milwaukee  
 Prepared By/Phone Ext: Hattie Billingsley Department Head Signature: *Eve Reinelt*  
 Account No: \_\_\_\_\_

A) Department Priority 4 of 13 Useful Life 30 Years Level of Need  Essential  Important  Desired  
 Type of Project  New  Replacement  Repair  On-Going Program Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**  
 Street Related  Sewer  Water  Street Lighting  Communications  Recreation  
 Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**  
 Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility  
 ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**  
 Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No  
 On-Going Program  Yes  No  
 Multi-Year  Yes  No Number of Years 2

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan  
 Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification  
 The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. To fulfill its mission and serve its customers, it is imperative that the Port purchase and maintain equipment to meet the customer's needs. The Port's marketing staff actively continues to pursue the wind energy business to transport through Milwaukee. They anticipate recent changes in the Wisconsin DOT regulations will increase the probability of transporting wind generation equipment and other heavy machinery through the Port. As such, the Port would need to have reliable heavy duty cranes to meet the needs of the stevedore in transferring this equipment between transportation modes.

G) Additional Comments  
 The Port will continue to investigate the possibility of subsidizing funding through grants from the Wisconsin Dept of Transportation Harbor Assistance Program to fund a major portion of the cost of the new crane. The grant would provide 80% of the funds with the remaining 20% funded from the City's Debt service fund.



## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: New Crane/Heavy Lift Equipment

Account No: \_\_\_\_\_

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request						\$0
2012 Projection	\$4,000,000					\$4,000,000
2013 Projection						\$0
2014 Projection						\$0
2015 Projection						\$0
2016 Projection						\$0
<b>Total Six Year Cost</b>	\$4,000,000	\$0	\$0	\$0	\$0	\$4,000,000
<b>Total Project Cost</b>	\$4,000,000	\$0	\$0	\$0	\$0	\$4,000,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

Available Cost Estimate:	2011	2012	2013	2014	2015	2016
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: 01/01/12

Estimated Completion Date: 12/31/13

Department Head Signature *Eric Remett*

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: Rail Track & Service Upgrades  
 Prepared By/Phone Ext: Hattie Billingsley / x-3649  
 Account No: PT180070100

Requesting Department: Port of Milwaukee  
 Department Head Signature: *Eric Kewett*

A) Department Priority 5 of 13 Useful Life 35 Years Level of Need  Essential  Important  Desired

Type of Project  New  Replacement  Repair  On-Going Program

Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**

Street Related  Sewer  Water  Street Lighting  Communications  Recreation  
 Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**

Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility  
 ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**

Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No

On-Going Program  Yes  No

Multi-Year  Yes  No Number of Years \_\_\_\_\_

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan

Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification

The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. The Port provides quality transportation and distribution services designed to anticipate and satisfy the needs and desires of our customers. The Port seeks to upgrade its 17 mile rail track system on an on-going basis to meet modern day safety and service load requirement by upgrading rail track from 90 lbs to 110/115 lbs.

G) Additional Comments

Funding for rail service upgrades was previously provided in part by grants from the Wisconsin Department of Transportation's Bureau of Railroads and Harbor (50%). It does not appear the projects needed during this six year cycle would be eligible for the grants.

## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Rail Track & Service Upgrades

Account No: PT180070100

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request						\$0
2012 Projection	\$100,000					\$100,000
2013 Projection						\$0
2014 Projection	\$100,000					\$100,000
2015 Projection						\$0
2016 Projection						\$0
<b>Total Six Year Cost</b>	\$200,000	\$0	\$0	\$0	\$0	\$200,000
<b>Total Project Cost</b>	\$200,000	\$0	\$0	\$0	\$0	\$200,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

<b>Available Cost Estimate:</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature *Eric Reinelt*

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: Analyze and Upgrade Sewer System

Requesting Department: Port of Milwaukee

Prepared By/Phone Ext: Hattie Billingsley / x-3649

Department Head Signature: *Eric Remelt*

Account No: \_\_\_\_\_

A) Department Priority 6 of 13 Useful Life 50 Years Level of Need  Essential  Important  Desired

Type of Project  New  Replacement  Repair  On-Going Program

Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**

Street Related  Sewer  Water  Street Lighting  Communications  Recreation

Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**

Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility

ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**

Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No

On-Going Program  Yes  No

Multi-Year  Yes  No Number of Years \_\_\_\_\_

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries \$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

E) In Six Year Capital Improvement Plan

Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification

The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. It is vital to this mission that the Port's infrastructure is maintained in excellent condition. This is an on-going program. The Port of Milwaukee maintains an extensive (10 miles) sewer system to serve the Port area. Regular inspections of the system are needed to determine if heavy and corrosive cargo loadings have reduced the capacity of the system. Rehabilitation of the system may be needed for safety, and to meet state and federal regulations. If this program is not funded or is funded at a reduced level, the analysis and any rehabilitation would be prolonged and the Port may be in violation of state and/or federal regulations.

G) Additional Comments

The 2011 funding would be utilized to fund the cost of doing a study on the cost of transporting salt brine run-off to the treatment plant (MMSD).

## Capital Improvement Request Part II

**Requesting Department:** Port of Milwaukee

**Project/Program Title:** Analyze and Upgrade Sewer System

**Account No:** \_\_\_\_\_

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request	\$75,000					\$75,000
2012 Projection						\$0
2013 Projection	\$200,000					\$200,000
2014 Projection						\$0
2015 Projection	\$200,000					\$200,000
2016 Projection						\$0
<b>Total Six Year Cost</b>	\$475,000	\$0	\$0	\$0	\$0	\$475,000
<b>Total Project Cost</b>	\$475,000	\$0	\$0	\$0	\$0	\$475,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

<b>Available Cost Estimate:</b>		<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
Thorough Cost Estimate		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Unsupported		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature

*Eric Remelt*

Prepared By/Phone Ext

Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

**Project/Program Title:** Harbor Maintenance Dredging      **Requesting Department:** Port of Milwaukee  
**Prepared By/Phone Ext:** Hattie Billingsley / x-3649      **Department Head Signature:** *Eric Kewett*  
**Account No:** PT18080200

**A) Department Priority** 7 of 13    **Useful Life** 50 Years    **Level of Need**     Essential     Important     Desired  
**Type of Project**     New     Replacement     Repair    **Project/Program Scope**     Fully Defined     Partially Defined  
 On-Going Program

**B) Description**  
**Infrastructure**  
 Street Related     Sewer     Water     Street Lighting     Communications     Recreation  
 Sidewalks     Alleys     Bridge     Environmental     Port     Parking  
**Building**  
 Roof     Windows     HVAC     Electrical     Restroom     Security     Exterior     Entire Facility  
 ADA     Office Remodeling     New Building     Elevators     Garage     Mechanical  
**Miscellaneous Development**  
 Economic     Information Systems     Equipment     Other \_\_\_\_\_

**C) Project/Program Duration**  
**One Year**             Yes     No  
**On-Going Program**     Yes     No  
**Multi-Year**             Yes     No    **Number of Years** \_\_\_\_\_

**D) Total Positions** 0    **Total FTEs** \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries	\$
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**E) In Six Year Capital Improvement Plan**  
 Yes     2009-2014     2010-2015     Yes, Modified     New Request

**F) Project/Program Justification**  
 The Port of Milwaukee is required to maintain the navigation channels in certain areas of the the harbor. Periodic dredging is required to maintain the required depth. This program allows the Port's navigation channel to be well maintained for lease and cargo operations. Well maintained channels are essential to the Port's continued successful operation and its ability to meet the objectives of the mission statement. Lease documents often require the Port to maintain navigation channels for the tenants. Loss of revenue to the City will result if the navigation channels are not maintained in a safe and useable condition.

**G) Additional Comments**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Harbor Maintenance Dredging

Account No: PT18080200

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request	\$150,000					\$150,000
2012 Projection						\$0
2013 Projection	\$150,000					\$150,000
2014 Projection						\$0
2015 Projection	\$150,000					\$150,000
2016 Projection						\$0
<b>Total Six Year Cost</b>	\$450,000	\$0	\$0	\$0	\$0	\$450,000
<b>Total Project Cost</b>	\$450,000	\$0	\$0	\$0	\$0	\$450,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

Available Cost Estimate:	2011	2012	2013	2014	2015	2016
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature *Eric Bennett*

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: Port Facility Systems

Requesting Department: Port of Milwaukee

Prepared By/Phone Ext: Hattie Billingsley / x-3649

Department Head Signature: *Sue Remett*

Account No: \_\_\_\_\_

A) Department Priority 8 of 13 Useful Life 20 Years Level of Need  Essential  Important  Desired

Type of Project  New  Replacement  Repair  On-Going Program

Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**

Street Related  Sewer  Water  Street Lighting  Communications  Recreation

Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**

Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility

ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**

Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No

On-Going Program  Yes  No

Multi-Year  Yes  No Number of Years \_\_\_\_\_

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan

Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification

The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. It is vital to this mission that the Port maintains its operating facilities in excellent condition. For the past several years the Port's operating budget includes about \$75,000 annually as a special fund to do major maintenance repairs to terminals and piers. This funding would be used for scheduled major repairs/maintenance to Port facilities and to do emergency repair work as needed, for projects/damages which exceed the special funds set aside for Major Maintenance Terminals and Piers. Loss of revenue to the City will result if the Port's facilities are not maintained in a safe and useable condition.

G) Additional Comments

The Port anticipates using the 2012 funds to do major maintenance and upgrades to the cruise dock and approach on the North Harbor tract. Other projects may be identified for this funding especially in the case of unanticipated incidents which may occur at the Port.



## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Port Facilities Systems

Account No: \_\_\_\_\_

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request						\$0
2012 Projection	\$100,000					\$100,000
2013 Projection						\$0
2014 Projection	\$100,000					\$100,000
2015 Projection						\$0
2016 Projection	\$100,000					\$100,000
<b>Total Six Year Cost</b>	\$300,000	\$0	\$0	\$0	\$0	\$300,000
<b>Total Project Cost</b>	\$300,000	\$0	\$0	\$0	\$0	\$300,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

Available Cost Estimate:	2011	2012	2013	2014	2015	2016
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Based on Cost of Similar Projects	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature *Eire Bennett*

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

**Project/Program Title:** Rehab Electrical Services So. Harbor Tract    **Requesting Department:** Port of Milwaukee  
**Prepared By/Phone Ext:** Hattie Billingsley    **Department Head Signature:** *Eric Ruett*  
**Account No:** PT180080100

**A) Department Priority** 9 of 13    **Useful Life** 30 Years    **Level of Need**     Essential     Important     Desired  
**Type of Project**     New     Replacement     Repair    **Project/Program Scope**     Fully Defined     Partially Defined  
 On-Going Program

**B) Description**  
**Infrastructure**  
 Street Related     Sewer     Water     Street Lighting     Communications     Recreation  
 Sidewalks     Alleys     Bridge     Environmental     Port     Parking  
**Building**  
 Roof     Windows     HVAC     Electrical     Restroom     Security     Exterior     Entire Facility  
 ADA     Office Remodeling     New Building     Elevators     Garage     Mechanical  
**Miscellaneous Development**  
 Economic     Information Systems     Equipment     Other \_\_\_\_\_

**C) Project/Program Duration**  
 One Year     Yes     No  
 On-Going Program     Yes     No  
 Multi-Year     Yes     No    **Number of Years** 4

**D) Total Positions** 0    **Total FTEs** \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries	\$
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**E) In Six Year Capital Improvement Plan**  
 Yes     2009-2014     2010-2015     Yes, Modified     New Request

**F) Project/Program Justification**  
 The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. The Port provides electrical service to ships docked at the Port for winter mooring and is responsible for at least some of the electrical generators on Jones Island. As part of the Port's on-going major upgrade/rehabilitation capital maintenance program we have reevaluated the South Harbor's overall electrical needs and determined necessary upgrades to ensure the electrical services under the Port's authority on Jones Island are operating within code and the electrical services made available to customers is adequate and conforms to our lease agreements and tariff.

**G) Additional Comments**  
 The Port began this upgrade in December 2009. Additional work will continue in late spring of 2010 at the City's heavy lift dock. The plan is to continue the electrical service rehabilitation/upgrade on the east mooring basin, as funds permit.

## Capital Improvement Request Part II

**Requesting Department:** Port of Milwaukee

**Project/Program Title:** Rehab Electrical Service So. Harbor Tract

**Account No:** PT180080100

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010	\$50,000					\$50,000
2011 Budget Request						\$0
2012 Projection						\$0
2013 Projection	\$100,000					\$100,000
2014 Projection						\$0
2015 Projection						\$0
2016 Projection						\$0
<b>Total Six Year Cost</b>	\$100,000	\$0	\$0	\$0	\$0	\$100,000
<b>Total Project Cost</b>	\$150,000	\$0	\$0	\$0	\$0	\$150,000

Life to Date Expenditures (Project Only)	\$2,457	\$0	\$0	\$0	\$0	\$2,457
--	---------	-----	-----	-----	-----	---------

Available Cost Estimate:	2011	2012	2013	2014	2015	2016
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: 12/01/09

Estimated Completion Date: 03/31/14

Department Head Signature

*Eric Nemeth*

Prepared By/Phone Ext

Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

**Project/Program Title:** Confined Disposal Facility Expansion      **Requesting Department:** Port of Milwaukee  
**Prepared By/Phone Ext:** Hattie Billingsley / x-3649      **Department Head Signature:** Eric Remelt  
**Account No:** PT180050400

**A) Department Priority** 10 of 13      **Useful Life** 50 Years      **Level of Need**     Essential     Important     Desired  
**Type of Project**     New     Replacement     Repair      **Project/Program Scope**     Fully Defined     Partially Defined  
 On-Going Program

**B) Description**  
**Infrastructure**  
 Street Related     Sewer     Water     Street Lighting     Communications     Recreation  
 Sidewalks     Alleys     Bridge     Environmental     Port     Parking  
**Building**  
 Roof     Windows     HVAC     Electrical     Restroom     Security     Exterior     Entire Facility  
 ADA     Office Remodeling     New Building     Elevators     Garage     Mechanical  
**Miscellaneous Development**  
 Economic     Information Systems     Equipment     Other    Land Reclamation

**C) Project/Program Duration**  
 One Year                     Yes     No  
 On-Going Program         Yes     No  
 Multi-Year                 Yes     No      **Number of Years** \_\_\_\_\_

**D) Total Positions** 0      **Total FTEs** \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries \$
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

**E) In Six Year Capital Improvement Plan**  
 Yes     2009-2014     2010-2015       Yes, Modified     New Request

**F) Project/Program Justification**  
 The Port has a major role in the local economy providing land for businesses that need to be near the water. Waterfront dock space on Jones Island is at a premium and the area which has such waterfront and dock space available is currently unuseable. Recovery of land by way of land fill has provided economic development on the south Harbor tract. This funding would sustain continued restoration of confined disposal facilities into marketable waterfront development.

**G) Additional Comments**  
 This funding is historically titled *Acquire & Rehab KK River Site*. In 2005 a technical amendment was adopted by the Common Council changing the title to *Confined Disposal Facility Expansion*.

## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Confined Disposal Facility Expansion

Account No: PT180050400

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request						\$0
2012 Projection	\$75,000					\$75,000
2013 Projection						\$0
2014 Projection	\$75,000					\$75,000
2015 Projection						\$0
2016 Projection	\$75,000					\$75,000
<b>Total Six Year Cost</b>	\$225,000	\$0	\$0	\$0	\$0	\$225,000
<b>Total Project Cost</b>	\$225,000	\$0	\$0	\$0	\$0	\$225,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

Available Cost Estimate:	2011	2012	2013	2014	2015	2016
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature Eric Remelt

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: Port Security Requesting Department: Port of Milwaukee  
 Prepared By/Phone Ext: Hattie Billingsley / x-3649 Department Head Signature: *Eric Hewitt*  
 Account No: PT180040100

A) Department Priority 11 of 13 Useful Life 30 Years Level of Need  Essential  Important  Desired  
 Type of Project  New  Replacement  Repair  On-Going Program  
 Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**  
 Street Related  Sewer  Water  Street Lighting  Communications  Recreation  
 Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**  
 Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility  
 ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**  
 Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No  
 On-Going Program  Yes  No  
 Multi-Year  Yes  No Number of Years \_\_\_\_\_

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries \$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

E) In Six Year Capital Improvement Plan  
 Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification  
 The mission of the Port of Milwaukee is to enhance the overall economic vitality of our region by stimulating trade, business and employment. In wake of the events of Sept. 11, 2001, the federal government through the Dept. of Homeland Security and the US Coast Guard have enacted numerous new evolving security measures for US Ports. This is an on-going program to enact needed security measures and mandates here at the Port of Milwaukee. The requested funds will be utilized to carryout the latest US Coast Guard security plans and programs for the Port of Milwaukee.

G) Additional Comments

---



---



---

## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Port Security

Account No: PT180040100

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010						\$0
2011 Budget Request						\$0
2012 Projection	\$100,000					\$100,000
2013 Projection	\$100,000					\$100,000
2014 Projection	\$100,000					\$100,000
2015 Projection	\$100,000					\$100,000
2016 Projection	\$100,000					\$100,000
<b>Total Six Year Cost</b>	\$500,000	\$0	\$0	\$0	\$0	\$500,000
<b>Total Project Cost</b>	\$500,000	\$0	\$0	\$0	\$0	\$500,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

Available Cost Estimate:	2011	2012	2013	2014	2015	2016
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature

*Eric Remelt*

Prepared By/Phone Ext

Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: Energy Efficient Initiatives/Upgrades

Requesting Department: Port of Milwaukee

Prepared By/Phone Ext: Hattie Billingsley

Department Head Signature: *Eric Kewitt*

Account No: PT180080400

A) Department Priority 12 of 13 Useful Life 30 Years Level of Need  Essential  Important  Desired

Type of Project  New  Replacement  Repair  On-Going Program

Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**

Street Related  Sewer  Water  Street Lighting  Communications  Recreation

Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**

Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility

ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**

Economic  Information Systems  Equipment  Other Mayor's energy conservation initiative

C) Project/Program Duration

One Year  Yes  No

On-Going Program  Yes  No

Multi-Year  Yes  No Number of Years \_\_\_\_\_

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries \$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

E) In Six Year Capital Improvement Plan

Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification

This on-going program is based on the Mayor's initiative to reduce energy cost with efficiency initiatives/upgrades to City facilities. The Port believes installing aluminum coated roofs on its terminals would result in more energy efficient facilities. Staff anticipates replacing every Port building with an energy efficient aluminum coated roof as replacements are deemed necessary/needed.

G) Additional Comments

Funding for this project historically is in the operating budget's special fund.



## Capital Improvement Request Part II

**Requesting Department:** Port of Milwaukee

**Project/Program Title:** Energy Efficient Initiatives/Upgrades

**Account No:** PT180080400

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010.						\$0
2011 Budget Request						\$0
2012 Projection	\$100,000					\$100,000
2013 Projection						\$0
2014 Projection	\$100,000					\$100,000
2015 Projection						\$0
2016 Projection	\$100,000					\$100,000
<b>Total Six Year Cost</b>	\$300,000	\$0	\$0	\$0	\$0	\$300,000
<b>Total Project Cost</b>	\$300,000	\$0	\$0	\$0	\$0	\$300,000

Life to Date Expenditures (Project Only)	\$0	\$0	\$0	\$0	\$0	\$0
--	-----	-----	-----	-----	-----	-----

<b>Available Cost Estimate:</b>		<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
Thorough Cost Estimate		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Based on Cost of Similar Projects		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupported		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature Eric Remitt

Prepared By/Phone Ext Hattie Billingsley / x-3649

# Capital Improvement Request Form Part I

Project/Program Title: Terminal Resurfacing Requesting Department: Port of Milwaukee  
 Prepared By/Phone Ext: Hattie Billingsley / x-3649 Department Head Signature: Eric Remelt  
 Account No: PT180080300

A) Department Priority 13 of 13 Useful Life 30 Years Level of Need  Essential  Important  Desired  
 Type of Project  New  Replacement  Repair  On-Going Program  
 Project/Program Scope  Fully Defined  Partially Defined

B) Description

**Infrastructure**  
 Street Related  Sewer  Water  Street Lighting  Communications  Recreation  
 Sidewalks  Alleys  Bridge  Environmental  Port  Parking

**Building**  
 Roof  Windows  HVAC  Electrical  Restroom  Security  Exterior  Entire Facility  
 ADA  Office Remodeling  New Building  Elevators  Garage  Mechanical

**Miscellaneous Development**  
 Economic  Information Systems  Equipment  Other \_\_\_\_\_

C) Project/Program Duration

One Year  Yes  No  
 On-Going Program  Yes  No  
 Multi-Year  Yes  No Number of Years \_\_\_\_\_

D) Total Positions 0 Total FTEs \_\_\_\_\_

Position Title	No. of Positions	FTEs	Salaries
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan  
 Yes  2009-2014  2010-2015  Yes, Modified  New Request

F) Project/Program Justification  
 It is vital to maintain Port property in order to enhance and preserve its economic vitality to the region. Over time various paved surfaces at several of the Port's terminals have settled due to the Harbor's subsurface conditions. This on-going maintenance program restores these paved areas to a useable condition where most needed as funding permits.

G) Additional Comments  
 Lease terms and safety regulations require these surfaces be restored to useable conditions. Currently carryover funds will be utilized to complete resurfacing projects at the City Heavy Lift Dock and both sides of Pier 1. The Port will continue to use carryover funds to complete resurfacing projects until the carryover funds are depleted.

## Capital Improvement Request Part II

Requesting Department: Port of Milwaukee

Project/Program Title: Terminal Resurfacing

Account No: PT180080300

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2010	\$340,141					\$340,141
2011 Budget Request						\$0
2012 Projection						\$0
2013 Projection	\$125,000					\$125,000
2014 Projection						\$0
2015 Projection	\$125,000					\$125,000
2016 Projection						\$0
<b>Total Six Year Cost</b>	\$250,000	\$0	\$0	\$0	\$0	\$250,000
<b>Total Project Cost</b>	\$590,141	\$0	\$0	\$0	\$0	\$590,141

Life to Date Expenditures (Project Only)	\$9,859	\$0	\$0	\$0	\$0	\$9,859
--	---------	-----	-----	-----	-----	---------

<b>Available Cost Estimate:</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
Thorough Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Cost of Similar Projects	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Unsupported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Were cost estimates confirmed by another source?  Yes  No  Uncertain
- Are cost estimates based on industry standards?  Yes  No  Uncertain
- Will city employees be performing any portion of the work?  Yes  No  Uncertain
- Did you perform a cost/benefit analysis?  Yes  No  Uncertain

How will this project impact city operating expenditures?  Increase  Decrease  None

Estimated Start Date: On-going

Estimated Completion Date: On-going

Department Head Signature Eric Bennett

Prepared By/Phone Ext Hattie Billingsley / x-3649