

REQUESTED BUDGET SUMMARY
YEAR 2012 CAPITAL IMPROVEMENTS PROGRAM
DPW-Infrastructure Div./Facilities Dev.& Mgmt.Section

Program Description	Budget
1. Environmental Program	\$200,000
A. Asbestos Abatement-Hazardous Waste	\$50,000
B. Soil & Groundwater Remediation	\$50,000
C. Leak Detection System upgrades	\$50,000
D. Fuel Dispenser Replacements	\$50,000
2. ADA Compliance Program	\$311,900
A. Dept. of Justice Citywide Transition Plan	\$50,000
B. 809 Building 2nd Floor Toilet Rooms	\$100,000
C. Recreational Facilities - Various ADA upgrades	\$161,900
3. Facilities Exterior Program	\$705,000
A. Safety Academy Stained Glass Façade	\$175,000
B. Reroofing Anderson Tower & Municipal Building	\$180,000
C. Overhead Door Replacement	\$150,000
D. Various Sites-Emergency Repairs	\$200,000
4. City Hall Complex Remodeling Program	\$100,000
A. City Hall Complex Carpet Replacement-Various Locations	\$40,000
B. City Hall Complex Various Office Remodeling	\$60,000
5. Outlying Facilities Program	\$850,000
A. Northwest Garage Upgrades	\$600,000
B. Northwest Garage 4-bay Vehicle Repair Area	\$200,000
C. Recreational Facilities - Various Sites Non Programmed	\$50,000
6. Facilities Systems Program	\$1,170,000
A. City Hall Complex - Annual Electrical Switchgear Testing and Repair	\$20,000
B. City Hall - Electrical Distribution and Code Compliance - Structural	\$150,000
C. Municipal Service Building - High Efficiency Boiler	\$150,000
D. Safety Academy Air Handling Unit Replacement	\$250,000
E. Various Sites - CCTV and Access Control Upgrades	\$100,000
F. Various Sites - Emergency Mechanical Repairs	\$200,000
G. Various Sites - Emergency Electrical Repairs	\$200,000
H. City Hall Complex - Chiller Rebuilds	\$100,000
8. Space Planning Alterations and Engineering	\$205,000
A. Space Planning	\$15,000
B. General Office Remodeling	\$40,000
C. General Engineering & Facilities Inspection	\$150,000
Facilities Development and Management - Sub-Total Capital Program	\$3,541,900
Special Project Description	
SP-1. City Hall Foundation	\$5,840,000
SP-2. Information Technology Equipment Room - (ON HOLD)	\$0
SP-3. Facility Condition Assessment Program - All City Buildings - Phase I	\$140,000
SP-4. Energy Efficiency and Renewable Energy	\$150,000
SP-5. Building Exterior Façade Restoration	\$590,000
SP-6. MacArthur Sq. Plaza Remediation	\$251,000
SP-7. Municipal Service Building Relocation	\$150,000
SP-8. City Facilities Consolidation - Phase I	\$60,000
FDM Special Projects Sub Total	\$7,181,000
Facilities Development & Management TOTAL	\$10,722,900

Capital Improvement Request Form Part I

Project/Program Title: Environmental Program Requesting Department: DPW/Infrastructure Facilities Development and Management
 Prepared By/Phone Ext: Facilities Development & Mgmt Ext. 3402 Department Head Signature: *[Signature]*
 Account No: BU11091500

A) Department Priority 1 of 7 Useful Life N/A 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 _____

Total Positions <u>2</u>		Total FTEs <u>0.8</u>	
Position Title	Professional/Inspection	No. of Positions	FTEs
		<u>2</u>	<u>0.28</u>
			Salaries \$ <u>20,140</u>
			\$ _____
			\$ _____

E) In Six Year Capital Improvement Plan
 Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification
 This is an ongoing program to provide a safe environment for the public and employees that use City-owned buildings by removing hazardous asbestos and lead containing building materials during maintenance, that becomes damaged, or that will be disturbed during any construction activity. The program also provides funding for monitoring as required by code for closed landfills and sites contaminated from past leaking underground storage tanks. This program is also used to provide monitoring and repairs to petroleum storage tanks and dispensing equipment in order to avoid future contamination and as required by code. Additionally, this program supports the upgrades and repairs to stormwater management systems and equipment.

G) Additional Comments

The projects for 2012 are:

Asbestos Abatement and Hazardous Waste	\$50,000
Soil and Groundwater Remediation	\$50,000
Leak Detection System Upgrades	\$50,000
Fuel Dispenser Replacements	\$50,000
Total	\$200,000

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management Account No: BU11091500
 Project/Program Title: Environmental Program

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011						\$0
2012 Budget Request	\$200,000					\$200,000
2013 Projection	\$200,000					\$200,000
2014 Projection	\$324,000					\$324,000
2015 Projection	\$329,000					\$329,000
2016 Projection	\$334,000					\$334,000
2017 Projection	\$339,000					\$339,000
Total Six Year Cost	\$1,726,000	\$0	\$0	\$0	\$0	\$1,726,000
Total Project Cost	\$1,726,000	\$0	\$0	\$0	\$0	\$1,726,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

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: In-Progress

Estimated Completion Date: On-going

Department Head Signature

Prepared By/Phone Ext

Facilities Development & Management /Ext 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Management	Date Submitted:
Project/Program:	Environmental Program	
Prepared By:	Facilities Development and Management	Current Request:
Project Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
x				Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
				Does the project address a legislative, regulatory or court-ordered mandate ?
				Does the project promote long-term regulatory compliance ?
				Will there be serious negative impact on the City if compliance is not achieved?
				Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs ?
x				Will the project lead to increased productivity or service improvements ?
	x			Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
x				A. Will the project result in a reduction or increase in energy use ?
	x			Does the project involve specific energy reduction strategies or features?
x				B. Will this project cause disruptions to regular city operations ?
x				C. Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

A. Minimal due to newer insulation.
 B. Minimal
 C. Job Site coordination may make projects more costly.

CIC - Capital Improvement Request Part III (cont'd)


Project/Program: Environmental Program

Whenever possible, please quantify / describe the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
				Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
	x			Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
x			A.	Does the project increase or enhance recreational opportunities and/or green space?
	x			Will the project mitigate blight?
x				Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
	x			Does the project preserve or improve the historical or natural heritage of the City?
x				Is the project consistent with established community character?
x				Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
x				Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
			This is this projects goal.	
Comments / Other Considerations:				
A. This program has been used for funding of projects at Doyme Park and Hartang Quarry.				
Yes	No	N/A	Amount	
				Infrastructure - Primarily recurring infrastructure and facilities preservation programs
x				How does the request effect the pertinent replacement cycle ? Provide specifics below.
x				Has the facility being replaced exceeded its useful life?
x				Does this project extend the useful life of an existing facility?
x				Do maintenance costs exceed replacement costs? (See Below)
x				Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
	x			Will this project improve the functionality or service life of other related infrastructure?
Comments / Other Considerations:				
Asbestos abatement is often related to replacement of equipment being replaced that is beyond its life cycle. The leak detection and fuel dispenser (see photo) systems are at their useful life. It is time to replace them before replacement parts for repairs become hard or impossible to find.				
Yes	No	N/A	Amount	
				Economic / Community Development
x				Does the project have the potential to promote economic/community development in areas where growth is desired?
	x			Will the project continue to promote or enhance economic/community development in an already developed area?
x			A.	Is the net impact of the project positive?
	x			Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
	x			Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?
Comments / Other Considerations:				
A. Better environmental quality.				
Yes	No	N/A	Amount	
				Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
x				Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
	x			Can you quantify the impacts of a delay in this project?
Comments / Other Considerations:				

Capital Improvement Request Form Part I

Project/Program Title: ADA Compliance Program
Prepared By/Phone Ext: Facilities Development & Management
Account No: BU110010500

Requesting Department: DPW/Infrastructure: Facilities Development and Management
Department Head Signature: 

A) Department Priority 2 of 7 **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** _____

L) Total Positions 4 **Total FTEs** 1.02

Position Title	No. of Positions	FTEs	Salaries
<u>Professional/Inspection</u>	<u>2</u>	<u>0.88</u>	<u>\$ 63,300</u>
<u>Construction Trades</u>	<u>2</u>	<u>0.2</u>	<u>\$ 12,661</u>
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This program responds to new and updated regulations and to improve access to our facilities for the disabled and/or handicapped. The Federal government enacted the "Americans with Disabilities Act Accessibility Guidelines" (ADAAG) in 1991. To date many deficiencies remain in the City Hall Complex and outlying facilities. All government buildings were required to be in compliance with ADAAG by mid-1995. Contracted architectural services are in place to do this work and to evaluate/identify existing City facilities requiring ADAAG improvements as part of this program.

G) Additional Comments

The projects for 2012 are:

Department of Justice-Citywide Transition Plan	\$ 50,000
809 Building-2nd Floor Toilet Rooms	\$100,000
Recreational Facilities-Variou ADA upgrades	\$161,900
Total	\$311,900

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities and Development Management

Project/Program Title: ADA Compliance Program **Account No.:** BU110010500

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$311,900					\$311,900
2013 Projection	\$190,000					\$190,000
2014 Projection	\$190,000					\$190,000
2015 Projection	\$295,400					\$295,400
2016 Projection	\$295,400					\$295,400
2017 Projection	\$374,000					\$374,000
Total Six Year Cost	\$1,656,700	\$0	\$0	\$0	\$0	\$1,656,700
Total Project Cost	\$1,656,700	\$0	\$0	\$0	\$0	\$1,656,700

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

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:

Estimated Completion Date:

Department Head Signature

Prepared By/Phone Ext

Facilities Development & Management/Ext 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Management	Date Submitted:
Project/Program:	ADA Compliance Program	
Prepared By:	Facilities Development and Management	Current Request:
Project Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
x				Does the project mitigate an immediate risk ?

Comments / Other Considerations:
Reduces risks for those requiring accessibility

Yes	No	N/A	Amount	Regulatory Compliance
x				Does the project address a legislative, regulatory or court-ordered mandate ?
x				Does the project promote long-term regulatory compliance ?
	x			Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
	x			Will the project lead to a reduction in operating costs ?
x			For those requiring Accessibility	Will the project lead to increased productivity or service improvements ?
	x			Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
x				Will the project result in a reduction or increase in energy use ?
x				Does the project involve specific energy reduction strategies or features?
x			Minimal during construction	Will this project cause disruptions to regular city operations ?
	x			Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:
Newer equipment that is installed will be more energy efficient and slightly reduce energy costs.

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: ADA Compliance Program

Whenever possible, please quantify / describe the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
	X			Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	X			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
X				Does the project increase or enhance recreational opportunities and/or green space?
	X			Will the project mitigate blight?
X			Just those requiring accessibility	Does the project target the quality of life of all citizens or does it target one demographic?
X				Is one population affected positively and another negatively?
X				Does the project preserve or improve the historical or natural heritage of the City?
X				Is the project consistent with established community character?
X				Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
	X			Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?

Comments / Other Considerations:

Yes	No	N/A	Amount	Infrastructure - Primarily recurring infrastructure and facilities preservation programs
				How does the request effect the pertinent replacement cycle ? Provide specifics below.
X				Has the facility being replaced exceeded its useful life?
				Does this project extend the useful life of an existing facility?
	X			Do maintenance costs exceed replacement costs? (See Below)
X				Have you documented costs of unplanned or corrective maintenance related to the facility?
X				Does the project incorporate new technology that will provide enhanced service?
	X			Does the project extend service for new development or redevelopment?
X				Will this project improve the functionality or service life of other related infrastructure?

Comments / Other Considerations:

Yes	No	N/A	Amount	Economic / Community Development
	X			Does the project have the potential to promote economic/community development in areas where growth is desired?
	X			Will the project continue to promote or enhance economic/community development in an already developed area?
X				Is the net impact of the project positive?
	X			Would an alternate location for this project provide a greater positive economic impact?
X				Will the project produce desirable jobs in the City?
	X			Will the project rejuvenate an area that needs assistance?
X				Will the project promote the equitable distribution of the costs and benefits of development?

Comments / Other Considerations:

Yes	No	N/A	Amount	Special Considerations
	X			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
X				Are there critical timing issues associated with this project?
X				Are there inter-jurisdictional considerations?
	X			Can you quantify the impacts of a delay in this project?

Comments / Other Considerations:

The Department of Justice has a deadline for completion of surveys for compliance. MPS operates some of the sites.

Capital Improvement Request Form Part I

Project/Program Title: Facilities Exterior Program Requesting Department: DPW/Infrastructure: Facilities Development and Management
 Prepared By/Phone Ext: Facilities Development & Mgmt/Ext. 3402 Department Head Signature: *Jeff J. Mantel*
 Account No: _____

A) Department Priority 3 of 7 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 _____

Total Positions <u>4</u>		Total FTEs <u>0.9</u>				
Position Title	<u>Professional /Inspection</u>	No. of Positions	<u>1.46</u>	FTEs	<u>0.70</u>	Salaries \$ <u>50,350</u>
	<u>Construction Trades</u>		<u>2</u>		<u>0.76</u>	\$ <u>45,872</u>
						\$ _____

E) In Six Year Capital Improvement Plan
 Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification
 This program maintains City facilities in a watertight, energy efficient, and safe condition. Building materials deteriorate over time and allow water penetration into the structure causing damage to the interior finishes, structural elements, and building contents. Yard and parking lot pavements become deteriorated by weather and heavy use. There is also a need to upgrade existing site lighting and pave unimproved areas of yards to provide needed working space and/or parking.

G) Additional Comments

Safety Academy stained glass facade	\$175,000
Reroofing Anderson Tower and Municipal Building	\$180,000
Overhead door replacment	\$150,000
Various Site Emergency Repairs	\$200,000
Total	\$555,000

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development & Management

Account No: BU11091300

Project/Program Title: Facilities: Exterior Program

Special Assessment

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$555,000					\$555,000
2013 Projection	\$925,000					\$925,000
2014 Projection	\$925,000					\$925,000
2015 Projection	\$1,200,000					\$1,200,000
2016 Projection	\$1,200,000					\$1,200,000
2017 Projection	\$1,200,000					\$1,200,000
Total Six Year Cost	\$6,005,000	\$0	\$0	\$0	\$0	\$6,005,000
Total Project Cost	\$6,005,000	\$0	\$0	\$0	\$0	\$6,005,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

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: In-Progress

Estimated Completion Date: On-Going

Department Head Signature

Prepared By/Phone Ext

Facilities Development and Management /Ext. 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Management	Date Submitted:
Project/Program:	Facilities Exterior Program	
Prepared By:	Facilities Development and Management	Current Request:
pt Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
x				Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate ?
	x			Does the project promote long-term regulatory compliance ?
	x			Will there be serious negative impact on the City if compliance is not achieved?
		x		Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
x				Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs ?
x				Will the project lead to increased productivity or service improvements ?
	x			Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
x				Will the project result in a reduction or increase in energy use ?
x				Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations ?
	x			Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

New roofs with better insulation save energy. High speed roll up overhead doors will reduce energy and promote operational efficiency ! reduce maintenance cost due to doors being damaged less.

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Facilities Exterior Program

Whenever possible, please quantify / describe the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
	X			Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	X			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	X			Does the project increase or enhance recreational opportunities and/or green space?
X				Will the project mitigate blight?
			Just facility users	Does the project target the quality of life of all citizens or does it target one demographic?
			Facility users	Is one population affected positively and another negatively?
	X			Does the project preserve or improve the historical or natural heritage of the City?
X				Is the project consistent with established community character?
	X			Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
	X			Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?

Comments / Other Considerations:

Yes	No	N/A	Amount	Infrastructure - Primarily recurring infrastructure and facilities preservation programs
X				How does the request effect the pertinent replacement cycle ? Provide specifics below.
X				Has the facility being replaced exceeded its useful life?
X				Does this project extend the useful life of an existing facility?
X				Do maintenance costs exceed replacement costs? (See Below)
X				Have you documented costs of unplanned or corrective maintenance related to the facility?
X				Does the project incorporate new technology that will provide enhanced service?
	X			Does the project extend service for new development or redevelopment?
X				Will this project improve the functionality or service life of other related infrastructure?

Comments / Other Considerations:

Yes	No	N/A	Amount	Economic / Community Development
	X			Does the project have the potential to promote economic/community development in areas where growth is desired?
	X			Will the project continue to promote or enhance economic/community development in an already developed area?
X				Is the net impact of the project positive?
	X			Would an alternate location for this project provide a greater positive economic impact?
X				Will the project produce desirable jobs in the City?
	X			Will the project rejuvenate an area that needs assistance?
X				Will the project promote the equitable distribution of the costs and benefits of development?

Comments / Other Considerations:

Yes	No	N/A	Amount	Special Considerations
	X			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
X				Are there critical timing issues associated with this project?
	X			Are there inter-jurisdictional considerations?
	X			Can you quantify the impacts of a delay in this project?

Comments / Other Considerations:

Failure of façade or roof would cause extensive damage.

Capital Improvement Request Form Part I

Project/Program Title: City Hall Complex Remodeling Program
Prepared By/Phone Ext: Facilities Development & Mgmt Ext. 3402
Account No: BU11083900

Requesting Department: DPW/Infrastructure: Facilities Development and Management
Department Head Signature: *Jeff J. Mantle*

A) Department Priority 4 of 7 **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 _____

Total Positions	<u>2</u>	Total FTEs	<u>0.21</u>
Position Title	<u>Professional/Inspection</u>	No. of Positions	<u>2</u>
		FTEs	<u>0.21</u>
		Salaries	\$ <u>15,100</u>
			\$ _____
			\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This program provides the funding to address the architectural and mechanical remodeling work needed in the City Hall Complex. This remodeling work will create functional, efficient, and safe working environments, meet the new State of Wisconsin energy (lighting, mechanical equipment/controls), and safety (sprinkler and life/safety) building code requirements and the environment concerns such as asbestos identified floor fill material. In addition, this program will address interior building restoration work and departments' office reorganizational changes.

G) Additional Comments

This program is essential in providing quality working environments and functional operating improvements. The current strategy is to suspend this program's projects in years 2007-2012; however, this delays planned remodeling projects such as the Mayor's Office which hasn't been remodeled in over 30 years, as well as the City Clerks office. The Department of City Development's office on the 2nd and 3rd Floors and DOA-Information and Technology Management office on the 4th Floor of the 809 Building are also in need of remodeling, these offices haven't been remodeled since their occupancy in the early 1980's. A Long-Term Balanced-Funding Strategy for remodeling the City Hall complex which has 22 floors would need funding of \$2-4 million annually based upon a 20-year useful life.

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Project/Program Title: City Hall Complex Remodeling Program **Account No:** BU11083900

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$100,000					\$100,000
2013 Projection	\$250,000					\$250,000
2014 Projection	\$250,000					\$250,000
2015 Projection	\$250,000					\$250,000
2016 Projection	\$250,000					\$250,000
2017 Projection	\$250,000					\$250,000
Total Six Year Cost	\$1,350,000	\$0	\$0	\$0	\$0	\$1,350,000
Total Project Cost	\$1,350,000	\$0	\$0	\$0	\$0	\$1,350,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

- 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: _____ In Progress
 Estimated Completion Date: _____ On-Going

Department Head Signature

Prepared By/Phone Ext

Facilities Development and Management Ext. 3402

CIC - Capital Improvement Request Part III

Department: DPW/Infrastructure: Facilities Development and Management Date Submitted: _____
 Project/Program: City Hall Complex Remodeling
 Prepared By: Facilities Development and Management Current Request: _____
 Dept Head: Jeffrey Mantes 6 Yr Total: _____

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
	<input checked="" type="checkbox"/>			Does the project directly reduce risks to people or property?
	<input checked="" type="checkbox"/>			Does the project directly promote improved health or safety?
	<input checked="" type="checkbox"/>			Does the project mitigate an immediate risk?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
	<input checked="" type="checkbox"/>			Does the project address a legislative, regulatory or court-ordered mandate?
	<input checked="" type="checkbox"/>			Does the project promote long-term regulatory compliance?
		<input checked="" type="checkbox"/>		Will there be serious negative impact on the City if compliance is not achieved?
		<input checked="" type="checkbox"/>		Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		<input checked="" type="checkbox"/>		What return on investment will this project generate?
		<input checked="" type="checkbox"/>		What is the expected payback period for this project?
<input checked="" type="checkbox"/>				Does the project minimize life-cycle costs?
	<input checked="" type="checkbox"/>			Will the facility require additional personnel to operate?
<input checked="" type="checkbox"/>				Will the project lead to a reduction in operating costs?
<input checked="" type="checkbox"/>				Will the project lead to increased productivity or service improvements?
	<input checked="" type="checkbox"/>			Will the facility require significant annual maintenance?
	<input checked="" type="checkbox"/>			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	<input checked="" type="checkbox"/>			Is there a revenue generating opportunity? (e.g. user fees)
<input checked="" type="checkbox"/>				Will the project result in a reduction or increase in energy use?
<input checked="" type="checkbox"/>				Does the project involve specific energy reduction strategies or features?
<input checked="" type="checkbox"/>				Will this project cause disruptions to regular city operations?
<input checked="" type="checkbox"/>				Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

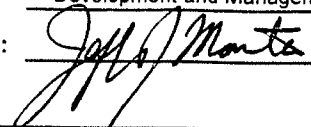
Project/Program: City Hall Complex Remodeling

Whenever possible, please quantify / describe the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.				
	x			Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	x			Does the project increase or enhance recreational opportunities and/or green space?
	x			Will the project mitigate blight?
	x			Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
x				Does the project preserve or improve the historical or natural heritage of the City?
x				Is the project consistent with established community character?
	x			Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
x				Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
<u>Comments / Other Considerations:</u>				
Infrastructure - Primarily recurring infrastructure and facilities preservation programs				
x				How does the request effect the pertinent replacement cycle ? Provide specifics below.
x				Has the facility being replaced exceeded its useful life?
x				Does this project extend the useful life of an existing facility?
x				Do maintenance costs exceed replacement costs? (See Below)
x				Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
x				Will this project improve the functionality or service life of other related infrastructure?
<u>Comments / Other Considerations:</u>				
Life cycle replacements always incorporate the newest technology and take into account the operational changes that have occurred since the equipment was installed.				
Economic / Community Development				
	x			Does the project have the potential to promote economic/community development in areas where growth is desired?
	x			Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
	x			Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
	x			Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?
<u>Comments / Other Considerations:</u>				
Special Considerations				
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
	x			Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
	x			Can you quantify the impacts of a delay in this project?
<u>Comments / Other Considerations:</u>				

Capital Improvement Request Form Part I

Project/Program Title: Outlying Facilities Program
 Prepared By/Phone Ext: Facilities Development & Mgmt. Ext 3402
 Account No: BU110030300

Requesting Department: DPW/Infrastructure: Facilities Development and Management
 Department Head Signature: 

A) Department Priority 5 of 7 Useful Life 25 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 _____

Total Positions	<u>3</u>	Total FTEs	<u>1.53</u>
Position Title	Professional/Inspection	No. of Positions	<u>1</u>
	Trades		<u>2</u>
		FTEs	<u>0.33</u>
		Salaries	\$ <u>23,740</u>
			\$ <u>71,500</u>
			\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This program was initiated to address the functional needs of DPW's aged and outmoded municipal garage facilities. At the time of their construction, these facilities were not built with today's modern diagnostic and repair environment in mind. Current layouts preclude movement of equipment, repair bays are cramped, and major operational and associated repair systems are outdated or have reached and, in many cases, surpassed their useful life. This program will also address the functional and operational needs of other outlying facilities not covered by other programs.

G) Additional Comments

Northwest Garage Upgrades	\$600,000
Northwest Garage 4-bay Vehicle Repair Area	\$200,000
Recreational Facilities-Variou Sites Non Programmed	\$ 50,000
Total	\$850,000

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Project/Program Title: Outlying Facilities Program **Account No:** BU110030300

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$850,000					\$850,000
2013 Projection	\$500,000					\$500,000
2014 Projection	\$500,000					\$500,000
2015 Projection	\$500,000					\$500,000
2016 Projection	\$500,000					\$500,000
2017 Projection	\$0					\$0
Total Six Year Cost	\$2,850,000	\$0	\$0	\$0	\$0	\$2,850,000
Total Project Cost	\$2,850,000	\$0	\$0	\$0	\$0	\$2,850,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

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: In-Progress

Estimated Completion Date: On-Going

Department Head Signature

Prepared By/Phone Ext

Facilities Development and Management/Ext. 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Mangement	Date Submitted:
Project/Program:	Outlying Facilities Program	
Prepared By:	Facilities Development and Management	Current Request:
pt Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
x				Does the project mitigate an immediate risk ?

Comments / Other Considerations:
Provide Healthy environment for occupants of this facility.

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate ?
	x			Does the project promote long-term regulatory compliance ?
	x			Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
	x			What return on investment will this project generate?
	x			What is the expected payback period for this project?
x				Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs ?
x				Will the project lead to increased productivity or service improvements ?
	x			Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
x				Will the project result in a reduction or increase in energy use ?
x				Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations ?
x				Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:
New equipment will be more efficient yielding energy savings. Additionally, a better organized facility will yield operational efficiencies.

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Outlying Facilities Program

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
	x			Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	x			Does the project increase or enhance recreational opportunities and/or green space?
	x			Will the project mitigate blight ?
		x		Does the project target the quality of life of all citizens or does it target one demographic?
		x		Is one population affected positively and another negatively?
	x			Does the project preserve or improve the historical or natural heritage of the City?
		x		Is the project consistent with established community character ?
		x		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
	x			Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?

Comments / Other Considerations:

Yes	No	N/A	Amount	Infrastructure - Primarily recurring infrastructure and facilities preservation programs
x				How does the request effect the pertinent replacement cycle ? Provide specifics below.
x				Has the facility being replaced exceeded its useful life ?
x				Does this project extend the useful life of an existing facility?
	x			Do maintenance costs exceed replacement costs? (See Below)
x				Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
x				Will this project improve the functionality or service life of other related infrastructure ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Economic / Community Development
	x			Does the project have the potential to promote economic/community development in areas where growth is desired ?
	x			Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
	x			Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
	x			Will the project rejuvenate an area that needs assistance?
		x		Will the project promote the equitable distribution of the costs and benefits of development?

Comments / Other Considerations:

Yes	No	N/A	Amount	Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
	x			Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations ?
	x			Can you quantify the impacts of a delay in this project?

Comments / Other Considerations:

Capital Improvement Request Form Part I

Project/Program Title: Facilities Systems Program
 Prepared By/Phone Ext: Facilities Development & Mgmt./Ext. 3402
 Account No: BU11091200

Requesting Department: DPW/Infrastructure: Facilities Development & Management
 Department Head Signature: *[Signature]*

A) Department Priority 6 of 7 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 _____

Total Positions 6 Total FTEs 1.9

Position Title	No. of Positions	FTEs	Salaries
Professional/Inspection	<u>2</u>	<u>0.85</u>	\$ <u>61,150</u>
Trades	<u>2</u>	<u>1</u>	\$ <u>59,270</u>
			\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This is an ongoing program to keep the City's buildings in good operating condition to properly serve the public and to provide suitable facilities for City employees. The program includes information gathered from our FCIS (Facilities Condition Information System) Program for installing new equipment or replacing existing equipment necessary for the proper up to date operation of various building systems. Facility system include heating, ventilating, and air conditioning (HVAC), plumbing, fire protection, electrical distribution, lighting, chillers, boilers, computerized facility management, security and life/safety.

G) Additional Comments

See Attached.

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development & Management

Facilities Systems Program

Project/Program Title:

Account No: BU11091200

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$1,170,000					\$1,170,000
2013 Projection	\$800,000					\$800,000
2014 Projection	\$1,200,000					\$1,200,000
2015 Projection	\$1,200,000					\$1,200,000
2016 Projection	\$1,600,000					\$1,600,000
2017 Projection	\$1,600,000					\$1,600,000
Total Six Year Cost	\$7,570,000	\$0	\$0	\$0	\$0	\$7,570,000
Total Project Cost	\$7,570,000	\$0	\$0	\$0	\$0	\$7,570,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

Thorough Cost Estimate 2012 2013 2014 2015 2016 2017

Limited Information 2012 2013 2014 2015 2016 2017

Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017

Unsupported 2012 2013 2014 2015 2016 2017

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: _____ In-Progress

Estimated Completion Date: _____ On-Going

Department Head Signature

Prepared By/Phone Ext

Facilities Development & Mgmt/Ext. 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Mangement	Date Submitted:
Project/Program:	Facilities Systems Program	
Prepared By:	Facilities Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety?
x				Does the project mitigate an immediate risk?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
x				Does the project address a legislative, regulatory or court-ordered mandate?
	x			Does the project promote long-term regulatory compliance?
	x			Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
x				Does the project minimize life-cycle costs?
	x			Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs?
x				Will the project lead to increased productivity or service improvements?
	x			Will the facility require significant annual maintenance?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity? (e.g. user fees)
x			Reduction	Will the project result in a reduction or increase in energy use?
x				Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations?
	x			Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Facilities Systems Program

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	x			Does the project increase or enhance recreational opportunities and/or green space?
x				Will the project mitigate blight ?
	x			Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
	x			Does the project preserve or improve the historical or natural heritage of the City?
x				Is the project consistent with established community character ?
	x			Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
x				Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?

Comments / Other Considerations:

Yes	No	N/A	Amount	Infrastructure - Primarily recurring infrastructure and facilities preservation programs
x				How does the request effect the pertinent replacement cycle ? Provide specifics below.
x				Has the facility being replaced exceeded its useful life ?
x				Does this project extend the useful life of an existing facility?
x				Do maintenance costs exceed replacement costs? (See Below)
x				Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
x				Will this project improve the functionality or service life of other related infrastructure ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Economic / Community Development
	x			Does the project have the potential to promote economic/community development in areas where growth is desired ?
x				Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
	x			Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
	x			Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?

Comments / Other Considerations:

Yes	No	N/A	Amount	Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
x				Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations ?
	x			Can you quantify the impacts of a delay in this project?

Comments / Other Considerations:

Failure of facility systems could lead to power, heating, water, security, data, and phone outages.

Capital Improvement Request Form Part I

Project/Program Title: Space Planning, Alterations & Engineering

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Prepared By/Phone Ext: Facilities Development & Mgmt/Ext 3402

Department Head Signature: *Jeff J. Mantz*

Account No: BU110010800

A) Department Priority 7 of 7 Useful Life _____ 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 _____

Total Positions <u>4</u>		Total FTEs <u>2.72</u>			
Position Title	Professional/Inspection	No. of Positions	<u>2</u>	FTEs	<u>2.42</u>
	Construction Trades		<u>2</u>		<u>0.3</u>
				Salaries	\$ <u>174,100</u>
					\$ <u>15,198</u>
					\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This program provides funds for architectural and engineering services related to office space studies, including preparation of preliminary plans and cost-estimates for proposed projects, unscheduled interior office alterations for City departments, and facility inspections.

G) Additional Comments

Space Planning	\$15,000
4-bay Vehicle Repair Area	\$40,000
General Engineering & Facilities Inspection	\$150,000
Total	\$205,000

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Project/Program Title: Space Planning, Alterations & Engineering **Account No.:** BU110010800

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$205,000					\$205,000
2013 Projection	\$172,000					\$172,000
2014 Projection	\$178,000					\$178,000
2015 Projection	\$184,000					\$184,000
2016 Projection	\$190,000					\$190,000
2017 Projection	\$196,000					\$196,000
Total Six Year Cost	\$1,125,000	\$0	\$0	\$0	\$0	\$1,125,000
Total Project Cost	\$1,125,000	\$0	\$0	\$0	\$0	\$1,125,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

- 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: In-Progress

Estimated Completion Date: On-Going

Department Head Signature

Prepared By/Phone Ext

Facilities Development and Management/Ext. 3402

CIC - Capital Improvement Request Part III

<u>Department:</u>	DPW/Infrastructure: Facilities Development and Management	<u>Date Submitted:</u>
<u>Project/Program:</u>	Space Planning, Alterations and Engineering	
<u>Prepared By:</u>	Facilities Development and Management	<u>Current Request:</u>
<u>Dept Head:</u>	Jeffrey Mantes	<u>6 Yr Total:</u>

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
	x			Does the project directly reduce risks to people or property?
	x			Does the project directly promote improved health or safety?
	x			Does the project mitigate an immediate risk?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate?
	x			Does the project promote long-term regulatory compliance?
	x			Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
	x			What return on investment will this project generate?
	x			What is the expected payback period for this project?
	x			Does the project minimize life-cycle costs?
		x		Will the facility require additional personnel to operate?
		x		Will the project lead to a reduction in operating costs?
		x		Will the project lead to increased productivity or service improvements?
		x		Will the facility require significant annual maintenance?
		x		Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
		x		Is there a revenue generating opportunity? (e.g. user fees)
		x		Will the project result in a reduction or increase in energy use?
		x		Does the project involve specific energy reduction strategies or features?
		x		Will this project cause disruptions to regular city operations?
x				Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

Unknown projects and estimates therefore unknown benefits or risks. FDM always updates, equipment when necessary for a remodeling with more efficient equipment and systems.

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Space Planning, Alterations and Engineering

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.				
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
		x		Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
		x		Does the project increase or enhance recreational opportunities and/or green space?
		x		Will the project mitigate blight?
		x		Does the project target the quality of life of all citizens or does it target one demographic?
		x		Is one population affected positively and another negatively?
		x		Does the project preserve or improve the historical or natural heritage of the City?
		x		Is the project consistent with established community character?
		x		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
		x		Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
<u>Comments / Other Considerations:</u>				
Infrastructure - Primarily recurring infrastructure and facilities preservation programs				
		x		How does the request effect the pertinent replacement cycle ? Provide specifics below.
		x		Has the facility being replaced exceeded its useful life?
x				Does this project extend the useful life of an existing facility?
		x		Do maintenance costs exceed replacement costs? (See Below)
		x		Have you documented costs of unplanned or corrective maintenance related to the facility?
		x		Does the project incorporate new technology that will provide enhanced service?
		x		Does the project extend service for new development or redevelopment?
x				Will this project improve the functionality or service life of other related infrastructure?
<u>Comments / Other Considerations:</u>				
Economic / Community Development				
		x		Does the project have the potential to promote economic/community development in areas where growth is desired?
		x		Will the project continue to promote or enhance economic/community development in an already developed area?
		x		Is the net impact of the project positive?
		x		Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
		x		Will the project rejuvenate an area that needs assistance?
		x		Will the project promote the equitable distribution of the costs and benefits of development?
<u>Comments / Other Considerations:</u>				
Special Considerations				
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
x				Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
	x			Can you quantify the impacts of a delay in this project?
<u>Comments / Other Considerations:</u>				
These projects generally occur due to operational needs of City Departments that require action to be taken ASAP.				

Capital Improvement Request Form Part I

Project/Program Title: City Hall Foundation Restoration
 Prepared By/Phone Ext: Facilities Development & Mgmt. Ext 3402
 Account No: BU110080800

Requesting Department: DPW/Infrastructure: Facilities Development & Management
 Department Head Signature: *Jeff J. Mantz*

A) Department Priority SP-1 of SP-6 Useful Life 100 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

Total Positions 3 Total FTEs 1.4

Position Title	No. of Positions	FTEs	Salaries
<u>Professional/Inspection</u>	<u>3</u>	<u>1.4</u>	<u>\$ 120,000</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This program addresses the deteriorated condition of City Hall's foundation primarily on the north side and the hollow sidewalks on the east and west sides of the building. The program restores the pile foundation to ensure the building is structurally sound and rebuilds the hollow sidewalks to provide a safe and a water tight condition. This funding will prevent further physical deterioration of the building. Funding in 2008 was provided for the project's professional design services. Funding for construction is being requested in 2009-12.

Note: Bonding authority required for total project cost to award construction contract

G) Additional Comments

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development & Management

Project/Program Title: City Hall Foundation & Restoration

Account No.: BU110080800

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$5,840,000					\$5,840,000
2013 Projection	\$0					\$0
2014 Projection	\$0					\$0
2015 Projection	\$0					\$0
2016 Projection	\$0					\$0
2017 Projection	\$0					\$0
Total Six Year Cost	\$5,840,000	\$0	\$0	\$0	\$0	\$5,840,000
Total Project Cost	\$5,840,000	\$0	\$0	\$0	\$0	\$5,840,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information
- Based on Cost of Similar Projects
- Unsupported

- 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: _____ In Progress _____

Estimated Completion Date: _____ On Going _____

Department Head Signature

Prepared By/Phone Ext

Facilities Development & Mgmt/Ext 3402

CIC - Capital Improvement Request Part III

Department: DPW/Infrastructure: Facilities Development and Management
 Project/Program: City Hall Foundation Restoration
 Prepared By: Facilities Development & Management
 Dept Head: Jeffrey Mantes

Date Submitted: _____
 Current Request: _____
 6 Yr Total: _____

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
x				Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate ?
	x			Does the project promote long-term regulatory compliance ?
	x			Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
	x			Will the project lead to a reduction in operating costs ?
	x			Will the project lead to increased productivity or service improvements ?
x				Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
	x			Will the project result in a reduction or increase in energy use ?
	x			Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations ?
x				Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: City Hall Foundation Restoration

Whenever possible, please quantify / describe the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.				
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	x			Does the project increase or enhance recreational opportunities and/or green space?
	x			Will the project mitigate blight?
	x			Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
x				Does the project preserve or improve the historical or natural heritage of the City?
x				Is the project consistent with established community character?
		x		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
		x		Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
<u>Comments / Other Considerations:</u>				
Infrastructure - Primarily recurring infrastructure and facilities preservation programs				
How does the request effect the pertinent replacement cycle ? Provide specifics below.				
x				Has the facility being replaced exceeded its useful life?
x				Does this project extend the useful life of an existing facility?
		x		Do maintenance costs exceed replacement costs? (See Below)
		x		Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
	x			Will this project improve the functionality or service life of other related infrastructure?
<u>Comments / Other Considerations:</u>				
Economic / Community Development				
	x			Does the project have the potential to promote economic/community development in areas where growth is desired?
x				Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
	x			Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
	x			Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?
<u>Comments / Other Considerations:</u>				
Special Considerations				
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
x				Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
	x			Can you quantify the impacts of a delay in this project?
<u>Comments / Other Considerations:</u>				

Capital Improvement Request Form Part I

Project/Program Title: Facility Condition Assessment Program Requesting Department: DPW/Infrastructure & Facilities Development and Management

Prepared By/Phone Ext: Facilities Development & Mgmt./Ext 3402 Department Head Signature: *Jeff J. Mantua*

Account No: _____

A) Department Priority SP-3 of SP-7 Useful Life 5 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	Total FTEs
<u>2</u>	<u>2.0</u>

Position Title	No. of Positions	FTEs	Salaries
<u>Professional/Inspection</u>	<u>2</u>	<u>2.0</u>	\$ <u>143,875</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This program will provide for the inspection of 20% of facilities city wide to assess the condition of each facilities major components. This information will provide metrics to measure which facilities are most in need of repairs, replacements, and upgrades.

G) Additional Comments

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure FDM **Account No.:** _____
Project/Program Title: Facility Condition Assessment Program

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$140,000					\$140,000
2013 Projection	\$150,000					\$150,000
2014 Projection	\$150,000					\$150,000
2015 Projection	\$150,000					\$150,000
2016 Projection	\$150,000					\$150,000
2017 Projection	\$150,000					\$150,000
Total Six Year Cost	\$890,000	\$0	\$0	\$0	\$0	\$890,000
Total Project Cost	\$890,000	\$0	\$0	\$0	\$0	\$890,000

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

Available Cost Estimate:

Thorough Cost Estimate	2012	2013	2014	2015	2016	2017
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: _____
 Estimated Completion Date: _____

Department Head Signature _____
Prepared By/Phone Ext _____ Facilities Development & Mgmt/Ext 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development & Management	Date Submitted:
Project/Program:	Facility Condition Assessment Program	
Prepared By:	Facility Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
x				Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate ?
	x			Does the project promote long-term regulatory compliance ?
	x			Will there be serious negative impact on the City if compliance is not achieved?
		x		Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs ?
x				Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs ?
x				Will the project lead to increased productivity or service improvements ?
	x			Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
			Reduction	Will the project result in a reduction or increase in energy use ?
x			A	Does the project involve specific energy reduction strategies or features?
	x			Will this project cause disruptions to regular city operations ?
x			B	Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

A. Inspection can be used to identify energy saving opportunities.

B. Inspections will indicate where repairs and replacement/upgrades are needed.

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Facility Condition Assessment Program

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
x				Does the project increase or enhance recreational opportunities and/or green space?
x				Will the project mitigate blight?
			All	Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
x				Does the project preserve or improve the historical or natural heritage of the City?
		x		Is the project consistent with established community character?
		x		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
x				Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?

Comments / Other Considerations:

Yes	No	N/A	Amount	Infrastructure - Primarily recurring infrastructure and facilities preservation programs
			A.	How does the request effect the pertinent replacement cycle ? Provide specifics below.
		x		Has the facility being replaced exceeded its useful life?
x				Does this project extend the useful life of an existing facility?
		x		Do maintenance costs exceed replacement costs? (See Below)
		x		Have you documented costs of unplanned or corrective maintenance related to the facility?
x			B.	Does the project incorporate new technology that will provide enhanced service?
x				Does the project extend service for new development or redevelopment?
x				Will this project improve the functionality or service life of other related infrastructure?

Comments / Other Considerations:

A. Inspection will highlight equipments expected life and when it has been surpassed.
 B. Inspections can indicate where new technology can be utilized to increase facility affectiveness and efficiency.

Yes	No	N/A	Amount	Economic / Community Development
x				Does the project have the potential to promote economic/community development in areas where growth is desired?
x				Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
		x		Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
x				Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?

Comments / Other Considerations:

Yes	No	N/A	Amount	Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
	x			Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
	x			Can you quantify the impacts of a delay in this project?

Comments / Other Considerations:

Capital Improvement Request Form Part I

Project/Program Title: Energy Efficiency & Renewable Energy

Requesting Department: DPW/Infrastructure: Facilities Development & Mgmt.

DPW/Infrastructure: Facilities
Development & Mgmt.

Prepared By/Phone Ext: Facilities Development & Mgmt Ext 3402

Department Head Signature: *Jeff J. Mante*

Account No: _____

A) Department Priority SP-4 of SP-7 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 _____ Ongoing _____

D) Total Positions 3 Total FTEs 0.62

Position Title	No. of Positions	FTEs	Salaries
<u>Professional/Inspection</u>	<u>2</u>	<u>0.42</u>	<u>\$ 30,200</u>
<u>Trades</u>	<u>1</u>	<u>0.2</u>	<u>\$ 13,100</u>
_____	_____	_____	_____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

Energy reduction initiatives and renewable energy projects will also be put into service. Buildings and Fleet will use this funding for grant matching where grants can be secured.

G) Additional Comments

Total: \$150,000

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Project/Program Title: Energy Efficiency & Renewable Energy Initiative Program

Account No: _____

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$150,000					\$150,000
2013 Projection	\$800,000					\$800,000
2014 Projection	\$850,000					\$850,000
2015 Projection	\$900,000					\$900,000
2016 Projection	\$950,000					\$950,000
2017 Projection	\$1,000,000					\$1,000,000
Total Six Year Cost	\$4,650,000	\$0	\$0	\$0	\$0	\$4,650,000
Total Project Cost	\$4,650,000	\$0	\$0	\$0	\$0	\$4,650,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

- 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: _____ In-Progress

Estimated Completion Date: _____ On-Going

Department Head Signature _____

Prepared By/Phone Ext _____

Facilities Development & Management Ext. 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Management	Date Submitted:
Project/Program:	Energy Efficiency and Renewable Energy	
Prepared By:	Facilities Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
	x			Does the project directly reduce risks to people or property?
	x			Does the project directly promote improved health or safety ?
	x			Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Is global warming an immediate risk? Does it affect health and safety?

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate ?
	x			Does the project promote long-term regulatory compliance ?
	x			Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
x				Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs ?
x				Will the project lead to increased productivity or service improvements ?
	x			Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
x			Reduction	Will the project result in a reduction or increase in energy use ?
x				Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations ?
	x			Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Energy Efficiency and Renewable Energy

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
				Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
x				Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	x			Does the project increase or enhance recreational opportunities and/or green space?
	x			Will the project mitigate blight?
x			All	Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
	x			Does the project preserve or improve the historical or natural heritage of the City?
x				Is the project consistent with established community character?
		x		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
x				Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
Comments / Other Considerations:				
Yes	No	N/A	Amount	
				Infrastructure - Primarily recurring infrastructure and facilities preservation programs
x				How does the request effect the pertinent replacement cycle ? Provide specifics below.
x				Has the facility being replaced exceeded its useful life?
x				Does this project extend the useful life of an existing facility?
x				Do maintenance costs exceed replacement costs? (See Below)
x				Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
x				Will this project improve the functionality or service life of other related infrastructure?
Comments / Other Considerations:				
Yes	No	N/A	Amount	
				Economic / Community Development
x				Does the project have the potential to promote economic/community development in areas where growth is desired?
x				Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
	x			Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
x				Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?
Comments / Other Considerations:				
Yes	No	N/A	Amount	
				Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
	x			Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
	x			Can you quantify the impacts of a delay in this project?
Comments / Other Considerations:				

Capital Improvement Request Form Part I

Project/Program Title: Building Exterior Façade Restoration

Requesting Department: DPW/Infrastructure: Facilities Development & Management

Prepared By/Phone Ext: Facilities Development & Mgmt Ext. 3402

Department Head Signature: *Jeff J. Mantel*

Account No: _____

A) Department Priority SP-5 of SP-7 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 5

Total Positions	<u>2</u>	Total FTEs	<u>0.83</u>
Position Title	<u>Professional/Inspection</u>	No. of Positions	<u>2</u>
		FTEs	<u>0.83</u>
		Salaries	\$ <u>59,700</u>
			\$ _____
			\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

In 2001 the City's Department of Neighborhood Services(DNS) enacted City Ordinance #275-32-13 requiring the In owner of any building in the City of Milwaukee that is 5 stories or greater to have a critical exam completed to determine if the facade of their building is in a safe condition. In 2006 Buildings & Fleet Services had a consulting firm (INSPEC) do a critical exam of the exterior facade of the Anderson Tower/Municipal Building(ATMB), the Zeidler Municipal Building(ZMB) and the Police Administration Building(PAB). In addition, INSPEC also inspected the 809 Broadway Building's(809) exterior facade. The results of these exams showed that the ATMB and ZMB had unsafe conditions that needed to be addressed immediately and that all four buildings' exterior facade needed repair/restoration work done to prevent further deterioration and future unsafe conditions

G) Additional Comments

In 2008 we corrected the ZMB's unsafe condition and provided temporary protection at the ATMB while awaiting 2009 approved funding to correct the condition. This program would address the repair/restoration work that is still needed on the ZMB, 809 and PAB buildings. Funding for this program is requested to begin in 2011 with the Zeidler Municipal Building Exterior Façade Restoration.

2012 funding will address the second phase of repairs on the ZMB as noted in the building facade inspection report.

Total \$590,000

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Project/Program Title: Building Exterior Façade Restoration

Account No.:

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$590,000					\$590,000
2013 Projection	\$500,000					\$500,000
2014 Projection	\$500,000					\$500,000
2015 Projection	\$500,000					\$500,000
2016 Projection	\$0					\$0
2017 Projection	\$0					\$0
Total Six Year Cost	\$2,090,000	\$0	\$0	\$0	\$0	\$2,090,000
Total Project Cost	\$2,090,000	\$0	\$0	\$0	\$0	\$2,090,000

Life to Date Expenditures (Project Only)

\$0	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

- 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: 12/31/16

Department Head Signature

Prepared By/Phone Ext

Facilities Development & Management/Ext 3409

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development & Management	Date Submitted:
Project/Program:	Building Exterior Façade Restoration	
Prepared By:	Facilities Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety?
x				Does the project mitigate an immediate risk?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
x				Does the project address a legislative, regulatory or court-ordered mandate?
x				Does the project promote long-term regulatory compliance?
x				Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs?
	x			Will the facility require additional personnel to operate?
	x			Will the project lead to a reduction in operating costs?
	x			Will the project lead to increased productivity or service improvements?
	x			Will the facility require significant annual maintenance?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity? (e.g. user fees)
	x			Will the project result in a reduction or increase in energy use?
	x			Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations?
x				Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Building Exterior Façade Restoration

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
				Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	x			Does the project increase or enhance recreational opportunities and/or green space?
x				Will the project mitigate blight?
	x			Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
x				Does the project preserve or improve the historical or natural heritage of the City?
x				Is the project consistent with established community character?
	x			Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
	x			Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
<u>Comments / Other Considerations:</u>				
				Infrastructure - Primarily recurring infrastructure and facilities preservation programs
x				How does the request effect the pertinent replacement cycle ? Provide specifics below.
x				Has the facility being replaced exceeded its useful life?
x				Does this project extend the useful life of an existing facility?
	x			Do maintenance costs exceed replacement costs? (See Below)
x				Have you documented costs of unplanned or corrective maintenance related to the facility?
	x			Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
	x			Will this project improve the functionality or service life of other related infrastructure?
<u>Comments / Other Considerations:</u>				
				Economic / Community Development
	x			Does the project have the potential to promote economic/community development in areas where growth is desired?
	x			Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
	x			Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
	x			Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?
<u>Comments / Other Considerations:</u>				
				Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
x				Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
	x			Can you quantify the impacts of a delay in this project?
<u>Comments / Other Considerations:</u>				
Critical nature related to failing facades.				

Capital Improvement Request Form Part I

Project/Program Title: MacArthur Square Plaza Remediation

Requesting Department: DPW/Infrastructure: Facilities Development and Management

DPW/Infrastructure: Facilities Development and Management

Prepared By/Phone Ext: Facilities Development & Mgmt/Ext 3402

Department Head Signature: *John A. Mertes*

Account No: BU110080900

A) Department Priority SP-6 of SP-7 Useful Life 10 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 2 Total FTEs 0.18

Position Title	No. of Positions	FTEs	Salaries
<u>Professional/Inspection</u>	<u>2</u>	<u>0.18</u>	<u>\$ 12,950</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

The MacArthur Square Plaza was constructed in 1966-68. Since that time no significant changes were made, except for sidewalk replacement in the early 1980's. A 2005 engineering condition report outlined major deficiencies to all elements of the Plaza, including landscaping, irrigation, pool and fountain, architectural and structural elements, plumbing, and electrical lighting. The financial needs for this work range between \$16 million to \$19.2 million. The waterproofing beneath the soil overburden has failed and leaking causing operational problems for parking section and needs to be replaced

G) Additional Comments

This public space is under-utilized, and discussions with the Department of City Development have taken place emphasizing enhancing this area and making better use of this public space.

NOTE: 2005 engineering condition report available on request

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Project/Program Title: MacArthur Square Plaza Remediation **Account No.:** BU110080900

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$251,000					\$251,000
2013 Projection	\$251,000					\$251,000
2014 Projection	\$255,000					\$255,000
2015 Projection	\$259,000					\$259,000
2016 Projection	\$263,000					\$263,000
2017 Projection	\$267,000					\$267,000
Total Six Year Cost	\$1,546,000	\$0	\$0	\$0	\$0	\$1,546,000
Total Project Cost	\$1,546,000	\$0	\$0	\$0	\$0	\$1,546,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

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: _____ In-Progress

Estimated Completion Date: _____ On-Going

Department Head Signature

Prepared By/Phone Ext

Facilities Development and Management/Ext 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Management	Date Submitted:
Project/Program:	MacArthur Square Plaza Remediation	
Prepared By:	Facilities Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety?
x				Does the project mitigate an immediate risk?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate?
	x			Does the project promote long-term regulatory compliance?
	x			Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs?
	x			Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs?
	x			Will the project lead to increased productivity or service improvements?
	x			Will the facility require significant annual maintenance?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity? (e.g. user fees)
	x			Will the project result in a reduction or increase in energy use?
	x			Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations?
	x			Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: MacArthur Square Plaza Remediation

Whenever possible, please quantify / describe the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions * each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
	X			Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
	X			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
X				Does the project increase or enhance recreational opportunities and/or green space?
X				Will the project mitigate blight?
			All citizens	
	X			Is one population affected positively and another negatively?
	X			Does the project preserve or improve the historical or natural heritage of the City?
X				Is the project consistent with established community character?
		X		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
		X		Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?

Comments / Other Considerations:

Yes	No	N/A	Amount	Infrastructure - Primarily recurring infrastructure and facilities preservation programs
			Beyond useful life	How does the request effect the pertinent replacement cycle ? Provide specifics below.
X				Has the facility being replaced exceeded its useful life?
X				Does this project extend the useful life of an existing facility?
X				Do maintenance costs exceed replacement costs? (See Below)
X				Have you documented costs of unplanned or corrective maintenance related to the facility?
	X			Does the project incorporate new technology that will provide enhanced service?
	X			Does the project extend service for new development or redevelopment?
	X			Will this project improve the functionality or service life of other related infrastructure?

Comments / Other Considerations:

Yes	No	N/A	Amount	Economic / Community Development
X				Does the project have the potential to promote economic/community development in areas where growth is desired?
X				Will the project continue to promote or enhance economic/community development in an already developed area?
X				Is the net impact of the project positive?
	X			Would an alternate location for this project provide a greater positive economic impact?
X				Will the project produce desirable jobs in the City?
	X			Will the project rejuvenate an area that needs assistance?
X				Will the project promote the equitable distribution of the costs and benefits of development?

Comments / Other Considerations:

Yes	No	N/A	Amount	Special Considerations
	X			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
X				Are there critical timing issues associated with this project?
X				Are there inter-jurisdictional considerations?
	X			Can you quantify the impacts of a delay in this project?

Comments / Other Considerations:

Safety is a factor. The MacArthur Square Plaza is shared by City and County.

Capital Improvement Request Form Part I

Project/Program Title: Municipal Service Building Relocation

Requesting Department: DPW/Infrastructure Facilities Development and Management

Prepared By/Phone Ext: Facilities Development & Mgmt/Ext. 3402

Department Head Signature: *Jeff J. Mantas*

Account No: _____

A) Department Priority SP-7 of SP-7 Useful Life _____ 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 3

Position Title	No. of Positions	FTEs	Salaries
<u>Professional/Inspection</u>	<u>2</u>	<u>0.50</u>	<u>\$ 36,000</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

This project will identify location, procure location, assess needs, and set up program for a new facility to replace the Municipal Service Building and Traffic sign shop so that these facilities can be sold for development.

G) Additional Comments

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure: Facilities Development and Management

Project/Program Title: Municipal Service Building Relocation

Account No.:

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011	\$0					\$0
2012 Budget Request	\$150,000					\$150,000
2013 Projection	\$250,000					\$250,000
2014 Projection	\$100,000					\$100,000
2015 Projection	\$0					\$0
2016 Projection	\$0					\$0
2017 Projection	\$0					\$0
Total Six Year Cost	\$500,000	\$0	\$0	\$0	\$0	\$500,000
Total Project Cost	\$500,000	\$0	\$0	\$0	\$0	\$500,000

Life to Date Expenditures (Project Only)

	\$0	\$0	\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

- 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: _____

Estimated Completion Date: _____

Department Head Signature

Prepared By/Phone Ext

Facilities Development & Mgmt/Ext. 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Management	Date Submitted:
Project/Program:	Municipal Service Building Relocation	
Prepared By:	Facilities Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
	x			Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
	x			Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
	x			Does the project address a legislative, regulatory or court-ordered mandate?
	x			Does the project promote long-term regulatory compliance ?
	x			Will there be serious negative impact on the City if compliance is not achieved?
		x		Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
x				Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
x				Will the project lead to a reduction in operating costs ?
x				Will the project lead to increased productivity or service improvements ?
x				Will the facility require significant annual maintenance ?
x				Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
			Reduction	Will the project result in a reduction or increase in energy use ?
x				Does the project involve specific energy reduction strategies or features?
x				Will this project cause disruptions to regular city operations ?
x				Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Municipal Service Building Relocation

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
	x			Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board ?
	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
	x			Does the project increase or enhance recreational opportunities and/or green space?
x				Will the project mitigate blight ?
			All	Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
	x			Does the project preserve or improve the historical or natural heritage of the City?
x				Is the project consistent with established community character ?
		x		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
x				Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?

Comments / Other Considerations:

Yes	No	N/A	Amount	Infrastructure - Primarily recurring infrastructure and facilities preservation programs
		x		How does the request effect the pertinent replacement cycle ? Provide specifics below.
x				Has the facility being replaced exceeded its useful life ?
	x			Does this project extend the useful life of an existing facility?
x				Do maintenance costs exceed replacement costs? (See Below)
x				Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
		x		Does the project extend service for new development or redevelopment?
		x		Will this project improve the functionality or service life of other related infrastructure ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Economic / Community Development
x			Possibly	Does the project have the potential to promote economic/community development in areas where growth is desired ?
x			Possibly	Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
		x		Would an alternate location for this project provide a greater positive economic impact?
x				Will the project produce desirable jobs in the City?
x			Possibly	Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?

Comments / Other Considerations:

Yes	No	N/A	Amount	Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
	x			Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations ?
	x			Can you quantify the impacts of a delay in this project?

Comments / Other Considerations:

Capital Improvement Request Form Part I

Project/Program Title: City Facilities Consolidation
 Prepared By/Phone Ext: Facilities Development & Mgmt/Ext 3402
 Account No: _____

Requesting Department: DPW/Infrastructure Facilities Development and Management
 Department Head Signature: *Jeff J. Mantus*

A) Department Priority _____ of _____ Useful Life _____ 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 _____ Total FTEs _____

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

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

See Attached.

G) Additional Comments

Capital Improvement Request Part II

Requesting Department: DPW/Infrastructure Facilities Development and Management

Project/Program Title: City Facilities Consolidation

Account No.:

Year	Special Assessment			Enterprise	Total Cost
	Tax Levy/Borrowing	Grant & Aid	Revenue		
Remaining Balance for 2011	\$0				\$0
2012 Budget Request	\$60,000				\$60,000
2013 Projection	\$80,000				\$80,000
2014 Projection	\$80,000				\$80,000
2015 Projection	\$0				\$0
2016 Projection	\$0				\$0
2017 Projection	\$0				\$0
Total Six Year Cost	\$220,000	\$0	\$0	\$0	\$220,000
Total Project Cost	\$220,000	\$0	\$0	\$0	\$220,000

Life to Date Expenditures (Project Only)

\$0	\$0	\$0	\$0
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Available Cost Estimate:

- Thorough Cost Estimate 2012 2013 2014 2015 2016 2017
- Limited Information 2012 2013 2014 2015 2016 2017
- Based on Cost of Similar Projects 2012 2013 2014 2015 2016 2017
- Unsupported 2012 2013 2014 2015 2016 2017

- 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: _____

Estimated Completion Date: _____

Department Head Signature

Prepared By/Phone Ext

Facilities Development and Management Ext 3402

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development and Management	Date Submitted:
Project/Program:	City Facilities Consolidation	
Prepared By:	Facilities Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
		x		Does the project directly reduce risks to people or property?
		x		Does the project directly promote improved health or safety ?
		x		Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
		x		Does the project address a legislative, regulatory or court-ordered mandate ?
		x		Does the project promote long-term regulatory compliance ?
		x		Will there be serious negative impact on the City if compliance is not achieved?
		x		Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs ?
		x		Will the facility require additional personnel to operate?
		x		Will the project lead to a reduction in operating costs ?
		x		Will the project lead to increased productivity or service improvements ?
		x		Will the facility require significant annual maintenance ?
		x		Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
		x		Is there a revenue generating opportunity ? (e.g. user fees)
		x		Will the project result in a reduction or increase in energy use ?
		x		Does the project involve specific energy reduction strategies or features?
		x		Will this project cause disruptions to regular city operations ?
		x		Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: City Facilities Consolidation

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
				Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
		x		Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
		x		Does the project increase or enhance recreational opportunities and/or green space?
		x		Will the project mitigate blight?
		x		Does the project target the quality of life of all citizens or does it target one demographic?
		x		Is one population affected positively and another negatively?
		x		Does the project preserve or improve the historical or natural heritage of the City?
		x		Is the project consistent with established community character?
		x		Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
		x		Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
Comments / Other Considerations:				
Meets Mayor's objective of consolidation of city services.				
Yes	No	N/A	Amount	
				Infrastructure - Primarily recurring infrastructure and facilities preservation programs
		x		How does the request effect the pertinent replacement cycle ? Provide specifics below.
		x		Has the facility being replaced exceeded its useful life?
		x		Does this project extend the useful life of an existing facility?
		x		Do maintenance costs exceed replacement costs? (See Below)
		x		Have you documented costs of unplanned or corrective maintenance related to the facility?
x				Does the project incorporate new technology that will provide enhanced service?
		x		Does the project extend service for new development or redevelopment?
		x		Will this project improve the functionality or service life of other related infrastructure?
Comments / Other Considerations:				
Yes	No	N/A	Amount	
				Economic / Community Development
		x		Does the project have the potential to promote economic/community development in areas where growth is desired?
		x		Will the project continue to promote or enhance economic/community development in an already developed area?
		x		Is the net impact of the project positive?
		x		Would an alternate location for this project provide a greater positive economic impact?
		x		Will the project produce desirable jobs in the City?
		x		Will the project rejuvenate an area that needs assistance?
		x		Will the project promote the equitable distribution of the costs and benefits of development?
Comments / Other Considerations:				
Yes	No	N/A	Amount	
				Special Considerations
				Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
				Are there critical timing issues associated with this project?
				Are there inter-jurisdictional considerations?
				Can you quantify the impacts of a delay in this project?
Comments / Other Considerations:				

Capital Improvement Request Form Part I

Project/Program Title: Hartung Park Landfill Closure

Requesting Department: Department of Public Works

Prepared By/Phone Ext: P. Hartmann/2329

Department Head Signature: *Jeff J. Martin*

Account No: New Project

A) Department Priority _____ of _____ 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 _____ Total FTEs _____

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

E) In Six Year Capital Improvement Plan

Yes 2010-2015 2011-2016 Yes, Modified New Request

F) Project/Program Justification

Hartung Park has reached will capacity for use by the City as a clean-fill landfill in 2012. This project will finalize closure of the landfill and include improvements to the landfill site for its future use as a recreational area.

G) Additional Comments

Capital Improvement Request Part II

Requesting Department: Department of Public Works **Account No.:** New Project
Project/Program Title: Hartung Park Landfill Closure

Year	Tax Levy/Borrowing	Grant & Aid	Revenue	Special Assessment	Enterprise	Total Cost
Remaining Balance for 2011				\$0		\$0
2012 Budget Request	\$100,000					\$100,000
2013 Projection						\$0
2014 Projection						\$0
2015 Projection						\$0
2016 Projection						\$0
2017 Projection						\$0
Total Six Year Cost	\$100,000	\$0	\$0	\$0	\$0	\$100,000
Total Project Cost	\$100,000	\$0	\$0	\$0	\$0	\$100,000

Life to Date Expenditures (Project Only)

2012	2013	2014	2015	2016	2017
\$0	\$0	\$0	\$0	\$0	\$0

Available Cost Estimate:

- Thorough Cost Estimate
- Limited Information
- Based on Cost of Similar Projects
- Unsupported

- 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: Spring 2012

Estimated Completion Date: 12/31/12

Department Head Signature _____

Prepared By/Phone Ext _____

CIC - Capital Improvement Request Part III

Department:	DPW/Infrastructure: Facilities Development & Management	Date Submitted:
Project/Program:	Hartung Park Landfill Closure	
Prepared By:	Facilities Development and Management	Current Request:
Dept Head:	Jeffrey Mantes	6 Yr Total:

General Project/Program Description:

Whenever possible, please quantify the impact of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	Health & Safety
x				Does the project directly reduce risks to people or property?
x				Does the project directly promote improved health or safety ?
	x			Does the project mitigate an immediate risk ?

Comments / Other Considerations:

Yes	No	N/A	Amount	Regulatory Compliance
x				Does the project address a legislative, regulatory or court-ordered mandate ?
x				Does the project promote long-term regulatory compliance ?
x				Will there be serious negative impact on the City if compliance is not achieved?
	x			Are there other ways to mitigate the regulatory concern?

Comments / Other Considerations:

Yes	No	N/A	Amount	Impact on Operational / Capital Budget
		x		What return on investment will this project generate?
		x		What is the expected payback period for this project?
		x		Does the project minimize life-cycle costs ?
	x			Will the facility require additional personnel to operate?
	x			Will the project lead to a reduction in operating costs ?
	x			Will the project lead to increased productivity or service improvements ?
	x			Will the facility require significant annual maintenance ?
	x			Will the new facility require additional equipment or the construction of additional infrastructure not included in the project budget?
	x			Is there a revenue generating opportunity ? (e.g. user fees)
	x			Will the project result in a reduction or increase in energy use ?
	x			Does the project involve specific energy reduction strategies or features?
	x			Will this project cause disruptions to regular city operations ?
	x			Are there other potential costs associated with this project that are not addressed above?

Comments / Other Considerations:

CIC - Capital Improvement Request Part III (cont'd)

Project/Program: Hartung Park Landfill Closure

Whenever possible, **please quantify / describe the impact** of the project in either the amount column or the comment section of each area. Supporting documentation does not need to be submitted with the request but should be available upon request. Please see Capital Guidelines for detailed descriptions of each area of emphasis and additional considerations.

Yes	No	N/A	Amount	
				Compliance with Area Plans - The Common Council has adopted Comprehensive Area Plans. CIC Guidelines document a link to those plans on the DCD website.
x				Is the project in conformance with and supportive of the goals, objectives and strategies of any applicable Comprehensive Plan, special study, survey, committee or board?
x	x			Does the project increase or enhance educational opportunities for City of Milwaukee citizens?
x				Does the project increase or enhance recreational opportunities and/or green space?
	x			Will the project mitigate blight?
x				Does the project target the quality of life of all citizens or does it target one demographic?
	x			Is one population affected positively and another negatively?
	x			Does the project preserve or improve the historical or natural heritage of the City?
	x			Is the project consistent with established community character?
	x			Does the project expand the range of transportation, employment, and housing choices in a fiscally responsible manner?
x				Does the project improve, mitigate or prevent degradation of environmental quality (e.g. water quality, improve or reduce pollution including noise and/or light pollution)?
<u>Comments / Other Considerations:</u>				
Yes	No	N/A	Amount	
				Infrastructure - Primarily recurring infrastructure and facilities preservation programs
	x			How does the request effect the pertinent replacement cycle ? Provide specifics below.
	x			Has the facility being replaced exceeded its useful life?
	x			Does this project extend the useful life of an existing facility?
	x			Do maintenance costs exceed replacement costs? (See Below)
	x			Have you documented costs of unplanned or corrective maintenance related to the facility?
	x			Does the project incorporate new technology that will provide enhanced service?
	x			Does the project extend service for new development or redevelopment?
	x			Will this project improve the functionality or service life of other related infrastructure?
<u>Comments / Other Considerations:</u>				
Yes	No	N/A	Amount	
				Economic / Community Development
x				Does the project have the potential to promote economic/community development in areas where growth is desired?
x				Will the project continue to promote or enhance economic/community development in an already developed area?
x				Is the net impact of the project positive?
		x		Would an alternate location for this project provide a greater positive economic impact?
	x			Will the project produce desirable jobs in the City?
	x			Will the project rejuvenate an area that needs assistance?
x				Will the project promote the equitable distribution of the costs and benefits of development?
<u>Comments / Other Considerations:</u>				
Yes	No	N/A	Amount	
				Special Considerations
	x			Is there a significant external funding source that can only be used for this project and/or which will be lost if not used immediately (e.g. proffers, grants through various federal or state initiatives, and private donations)?
x				Are there critical timing issues associated with this project?
	x			Are there inter-jurisdictional considerations?
x				Can you quantify the impacts of a delay in this project?
<u>Comments / Other Considerations:</u>				