

TOWN OF
MILFORD



OCD use:
CIP project # _____

2024-2029 CIP PROJECT REQUEST FORM

1. **DEPARTMENT:** _____ Wadleigh Memorial Library _____
2. **DATE REQUEST PREPARED:** _____ May 25, 2023 _____
3. **ITEM/PROJECT NAME:** _____ Building Addition _____
4. **REQUEST PREPARED BY:** _____ WML Library Trustees _____
5. **DEPT PRIORITY: # OF PROJECTS:** _____ 3 _____

6. **ITEM / PROJECT DESCRIPTION** (Provide complete description and attach additional explanatory materials if more than space allows)
Repair of current library electrical system. The current panel is an outdated and unsafe Federal Pacific panel. Parts no longer available for repairs. Electrician examined and stated that it is unsafe. Service needs to be upgraded to 600A. Associated improvements include replacing non code emergency lights and upgrades to exterior lighting. Finish conversion of all interior lighting to LED.

7. **IS THE ITEM/PROJECT IDENTIFIED IN A LONG RANGE PLAN OR PROGRAM?** YES NO
(Examples: Milford Master Plan; departmental work program (s); facilities plans; equipment/vehicle replacement plan, etc.)
Plan or document reference (attach supporting materials):

8. **ITEM / PROJECT RATIONALE:** (check all that apply)

- Improves the quality of life for residents.
- Benefits residents and/or businesses or a segment thereof.
- Addresses an emergency or public safety need.
- Increases the delivery of social services.
- Corrects a deficiency in operations, facility, or equipment.
- Provides capacity needed for anticipated or planned growth.
- Other _____

- Results in cost savings.
- Supports job creation and development
- Increases tax base.
- Identified in a long-range plan or program, including the town master plan.
- Non-property tax revenue and fees offset a portion of costs.
- Matching funds are available for a limited time.

9. ITEM / PROJECT JUSTIFICATION NARRATIVE:

(Explain urgency, timing, need, etc. Be brief yet complete and attach additional documentation if more than what space allows)

10. ESTIMATED USEFUL LIFE (Years): 20

11. YEAR REQUIRED: 2025

12. HAS THE ITEM/PROJECT BEEN INCLUDED IN PRIOR CIP'S? YES NO

13. IF YES, WHAT YEAR WAS PROJECT FIRST INCLUDED IN THE CIP? 2020 Expansion

14. COST ESTIMATE: \$ 195,000

15. CAPITAL COSTS: (If known)

Dollar Amount (in current \$)	
	Planning/feasibility analysis
	Professional services
	Real estate acquisition
	Site preparation
	Construction
	Furnishings & equipment
	Vehicles & capital equipment
	Capital Reserve fund
	Other
\$ 0.00	Total Project Cost

16. IMPACT ON OPERATING & MAINTENANCE:

- Costs or Personnel Needs
- Add personnel
- Reduce personnel
- Increased O & M costs
- Decreased O & M costs

Explain: _____

Dollar cost of annual impacts if known: (+)\$ _____ or (-)\$ _____

17. SOURCES OF FUNDING:

Funding Source	Dollar Amount (in current \$)	Describe Source (for grants/loans/special assessments/other)
Grant		
Loan		
Donation/Bequest/Private		
User Fees & Charges		
Capital reserve withdrawal		
Impact fee account		
Current revenue		
General obligation bond		
Revenue bond		
Special Assessment		
Other source		
Other source		
Project cost		
Minus revenue		
Total Project cost	\$ 0.00	

18. ANTICIPATED ITEMS/PROJECTS YOUR DEPARTMENT IS PROJECTING AFTER 2029

(List and provide brief description and attach additional documentation if more than space allows)

CIP CITIZENS' ADVISORY NOTES: