



OCD use: CIP project # _____

2024-2029 CIP PROJECT REQUEST FORM

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1. DEPARTMENT: Ambulance
 2. DATE REQUEST PREPARED: 5/25/2023
 3. ITEM/PROJECT NAME: Ambulance Replacement
 4. REQUEST PREPARED BY: Eric Schelberg, Director
 5. DEPT PRIORITY: # OF PROJECTS: 1 of 1
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6. ITEM / PROJECT DESCRIPTION (Provide complete description and attach additional explanatory materials if more than space allows)
Refer to attached narrative.

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):

Department vehicle replacement plans: 2013 - 2028.

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.

Ambulance – CIP Project Request 2024-2029: Ambulance Replacement

NARRATIVE

The ambulance department is requesting to replace the 2013-B (3B) ambulance in 2028 with a new ambulance. The department has a fleet of three ambulances and operates two of the ambulances in front-line capacity for 10-years followed by 5-years in a back-up role as a 'spare' ambulance. The 5-year ambulance replacement cycle eliminates purchasing two ambulances at one time.

The 3B ambulance currently has 149,386 miles indicated on the odometer and would be kept in service in a back-up role as a 'ready spare' ambulance in the event one of the two front-line ambulances is out of service for a prolonged time due to maintenance or accident.

In 2022 the department responded to 2,020 calls for service that resulted in 1,489 patients transported to various hospitals in Nashua, Manchester and Peterborough.

The 3A and 2020 (20A) ambulances are operated in a rotation pattern designed to spread mileage between the two ambulances on a 2:1 basis. The objective is to keep both ambulances in front-line service for ten years. It is envisioned this rotation pattern will prolong the life of one ambulance – 20A, such that it would remain as the second-due ambulance for five years with the 2023 ambulance being second-due and the 3B ambulance remaining in the back-up role. This rotation would be continued going forward such that a five year replacement cycle would be maintained.

In 9.5 years of operation, the 3B ambulance has traveled 149,386 miles, with the bulk of the mileage accumulated through December 2020, when it was placed in the back-up role upon entry of the 2020 ambulance being placed in service. The first due ambulance, or the ambulance on the 24-hour shift accumulates approximately 35,000 miles annually with the second due ambulance, or the ambulance on the 16-hour shift accumulates approximately 25,000 miles annually.

Replacing the 3B ambulance in 2028 after 10-years of front-line service and 5-years of back-up service maintains a 5-year replacement cycle and avoid replacing two ambulances at one time in the future.

The department goal for ambulance replacement is to continue a 5-year replacement cycle for a three ambulance fleet.

9. ITEM / PROJECT JUSTIFICATION NARRATIVE:

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

Refer to #6 above - Item/Project Description.

10. ESTIMATED USEFUL LIFE (Years): 15

11. YEAR REQUIRED: 2028

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? 2013

14. COST ESTIMATE: \$ 684,645

15. CAPITAL COSTS: (if known)

Dollar Amount (in current \$)	
	Planning/feasibility analysis
	Professional services
	Real estate acquisition
	Site preparation
	Construction
\$134,645.00	Furnishings & equipment
\$550,000.00	Vehicles & capital equipment
	Capital Reserve fund
	Other
\$ 684,645.00	Total Project Cost

16. IMPACT ON OPERATING & MAINTENANCE:

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

Reduction in annual maintenance cost for ambulance fleet plus introduction of warranty.

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	\$0.00	Used for purchase of 2023 approved amb.
Impact fee account		
Current revenue		
General obligation bond		
Revenue bond		
Special Assessment		
Other source		Possible creation of Revolving Fund from
Other source		ambulance revenue to fund.
Project cost	\$684,645.00	
Minus revenue		
Total Project cost	\$ 684,645.00	

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

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

Ambulance replacement in 2033 in accordance with 5-year replacement cycle.

CIP CITIZENS' ADVISORY NOTES: