

**Belmont Capital Funding Request  
Budget Year 2012 - CIP 2012-2017**

Office Use CIP Project ID : _____ MP Cite: _____ Rec'd Date: _____
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TO:  CIP Committee  Selectmen

Department: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Tele: \_\_\_\_\_

Submission Date: \_\_\_\_\_ Department Priority \_\_\_\_\_ of \_\_\_\_\_ (current budget year)

Project Name: \_\_\_\_\_ Anticipated Start/Purchase Date: \_\_\_\_\_

Project Need/  
Deficiency: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Check All That Apply**
- Replace or repair of existing facilities or equipment
  - Improve quality of existing facilities or equipment
  - Expand capacity of existing service level/facility
  - Provide new facility or service capacity

Project Rationale/  
Justification: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Check All That Apply**
- Reduces long-term operating costs
  - Removes imminent threat to public health or safety
  - Alleviates substandard conditions or deficiencies
  - Responds to federal or state requirements to implement
  - Improves the quality of existing services
  - Provides added capacity to serve growth
  - Provides incentive to economic development
  - Eligible for matching funds available for a limited time

Was funding previously requested:  Yes  No      If Yes – When? \_\_\_\_\_  
Is Project Currently in CIP?  Yes  No      If Yes - How does this request change the CIP  
project? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROJECT ESTIMATES**

***COSTS***

<b>Planning/Feasibility</b>	\$ _____
<b>Architect/Engineering Fees</b>	\$ _____
<b>Real Estate Acquisition</b>	\$ _____
<b>Site Preparation</b>	\$ _____
<b>Construction</b>	\$ _____
<b>Furnishings &amp; Equipment</b>	\$ _____
<b>Vehicles and Capital Equipment</b>	\$ _____
<b>Other: _____</b>	\$ _____
<b>Other: _____</b>	\$ _____
<b>Other: _____</b>	\$ _____
 <b>Total Estimated Project Cost:</b>	 \$ _____

***FUNDING***

		Proposed Year(s)/Amounts					
		2012	2013	2014	2015	2016	2017
Existing Account Withdrawal							
COMSTAR	\$ _____	_____	_____	_____	_____	_____	_____
Conservation Fund	\$ _____	_____	_____	_____	_____	_____	_____
Capital Reserve Acct:	\$ _____	_____	_____	_____	_____	_____	_____
Other: _____	\$ _____	_____	_____	_____	_____	_____	_____
Taxes	\$ _____	_____	_____	_____	_____	_____	_____
Taxes-New Capital Reserve Account	\$ _____	_____	_____	_____	_____	_____	_____
Taxes-Bond	\$ _____	_____	_____	_____	_____	_____	_____
Grants from: _____	\$ _____	_____	_____	_____	_____	_____	_____
Loan from: _____	\$ _____	_____	_____	_____	_____	_____	_____
Donation/bequest/private	\$ _____	_____	_____	_____	_____	_____	_____
User charge, fee or betterment assessment	\$ _____	_____	_____	_____	_____	_____	_____
<b>Total Estimated Funding:</b>	<b>\$ _____</b>						

**Describe future funding obligations/operating costs resulting from proposed project:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_