Capital Request Form

TOWN OF PLYMPTON

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| **Department:** | Click here to enter text. | **Priority Level: (Rank Level 1-5, with 1 = Highest Priority** | Click here to enter text. |
| **Contact person:** | Click here to enter text. |
| **Phone:** | Click here to enter text. | **Email:** | Click here to enter text. |
| **Proposed project name:** | Click here to enter text. |
| **Project location:** | Click here to enter text. |
| **Project description:** | Click here to enter text. |
| **Why project is needed/ consequence for not completing :** | Click here to enter text. |
| **Combine with other projects? Which?** | Click here to enter text. |
| **Date Asset was Built or Purchased** | Click here to enter text. |
| **Useful Life (in years)** | Click here to enter text. |

Financial Implications

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| --- | --- |
| **Total project cost:** | Click here to enter text. |
| **When needed (identify amount needed each year of Five Year Capital Plan):** |
| **FY18** | Click here to enter text. | **FY19** | Click here to enter text. | **FY20** | Click here to enter text. | **FY21** | Click here to enter text. | **FY22** | Click here to enter text. |
| **Potential grant funds or other resources that could help offset project costs (list in box to right):** | Click here to enter text. |
| **Projected impact on operating budget [Show increases as positive (+) and savings as negative (-).]** |
| **FY18** | Click here to enter text. | **FY19** | Click here to enter text. | **FY20** | Click here to enter text. | **FY21** | Click here to enter text. | **FY22** | Click here to enter text. |
| Other Comments: |
| Click here to enter text. |

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| **Requested by:** | Click here to enter text. | **Date:** | Click here to enter text. |