CA-105	131	1/17	7)

AT THE CENT	• • •			_			CA-105 v3 (1/1
WEST ALLIS	Capital I	mprov	emen	t Requ	est F	orm	
Date:		Department:		Department Priority of			
Project Name:		Location:			Prepared by:		
Duration: O	ne Year 🗌 On-going 🔲	Multi-Year # of Years		Need: 🗌 Essential 🔲 Important 🗌 Desired			
Type of Project:		ment  Repair  On-going IT Component:  No  Yes, describe:					
	In Previous Plan: No, New Request Yes, modified If approved - Estimated Start Date: End Date:						
Engineering/PW Imp		ructure)*					
Local Streets include tas							
Major Streets Pave	ment Repair 🗌 Storm S	Sewer 🗌 Sanitary	Sewer 🗌 Wat	er Main 🗌 Parkir	ng Lot		
Street Lighting Side	walks & Bike Trails 🔲 /	Alleys 🔲 Bridge (	Inspect. & Repa	r)	trols – Intersect	ions	
Equipment (attach re	placement schedu	le, if applicable	e)				
Uehicle(s) IT System	ns/Equipment (if applicab	le) 🗌 Equipment I	Number (if applic	able) #			
Briefly describe:							
Buildings & Facilities	5*						
Roof Windows H	AC 🗌 Electrical 🗌 Res	stroom 🗌 Carpetino	g, Tiles, W&W C	overings 🗌 ADA [	Office Remo	odeling 🗌 New Bu	ilding
Miscellaneous, describe	:						
Cost Estimate derive	d from:						
Actual Estimate (attach)	Limited Information	Based on Similar F	Proiects □ Not \$	upported			
Estimated Total Proje				apponed			
Sources	Year 1	Year 2	Year 3	Yea	ar 4	Year 5	Total
General Fund							
Developer Contribution							
Debt Financing							
Special Assessments							
State DOT							
State Grant							
Federal Grant							
TIF							
Other							
Total							
* Uses of Funds							
Land/R-O-W Acquisition							
Design							
Bidding							
Construction Management							
Misc. (List details)							
Total Use of Funds							
CIP Category							
		Expenditur	e Revenue	Ongoing			
,			\$	\$			
, ,	Utilities (W/S/S)		\$	\$			
Traffic			\$	\$			
Parks			\$	\$			
Property			\$	\$			
Equipment			\$	\$			

Pro	iect	Nai	me:
FIU		INAI	110.

Assumptions used in estimate and fund usage:

Project Description/Details: (attach additional sheet if necessary)

# of Citizens/Businesses Impacted Per Year: 🗌 1-49 🗋 50-249 🗋 250-499 🗋 500-999 🔲 1000-2499 🛄 2500-5000 🔲 5001-10,000 🔲 10,000 or more

Time Savings (in hours) Per Year: None 1-99 hours 100-259 260-519 520-1039 1040-2080 2081-4160 4160 or more

# Employees impacted per year: None Less than 5 5-24 25-49 50-99 100-250 250-500 501 or more

Cost Savings Per Year: None \$1-\$1000 \$1001-5000 \$5001-10,000 \$10,001-25,000 \$25,001-50,000 \$50,000 or more

Does the project address a mandate? 
No 
Yes, describe:

Does the project reduce Liability? 
No Yes, describe:

Does the project require additional Staff or overtime? 
No Yes, describe:

Does the project generate revenue? 
No Yes, describe:

Support the City's Green Initiative? 
No Yes, describe:

What is the justification or benefit of this project? Which Strategic Goal or Action does the project impact? List goal and describe how:

Is the project related to another capital project? 
No Yes, describe:

How does the project relate to the City's Comprehensive Plan? 
No 
Yes, describe:

Finance Only: Does the funding level fit within the City's funding and debt policies? 
No Yes

Comments: