

2020  
CITY OF AMERICUS  
CAPITAL IMPROVEMENTS REQUEST

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1. Department: \_\_\_\_\_

2. Project Title: \_\_\_\_\_

3. Location: \_\_\_\_\_

4. Submitted by/Title: \_\_\_\_\_

5. Departmental Priority: \_\_\_\_\_

6. Departmental Goal/Objective: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Estimated Cost:

ENGINEERING/ ARCHITECT	\$
LAND ACQUISITION	\$
DEMOLITION	\$
SITE IMPROVEMENT	\$
BLDG. CONSTRUCTION	\$
LANDSCAPING	\$
EQUIPMENT	\$
OTHER	\$
TOTAL	\$

8. Suggested means of financing project:

CURRENT REVENUE \_\_\_\_\_  
REVENUE BONDS \_\_\_\_\_  
GRANTS \_\_\_\_\_  
CDBG FUNDS \_\_\_\_\_  
OTHER \_\_\_\_\_

9. Detail Project Description:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Annual Maintenance and operating costs:

\_\_\_\_\_

11. Estimated life of the project: \_\_\_\_\_

12. Will there be future expenditures not included in the project cost?

YES

NO

13. Will the project generate revenues?

YES

NO

If yes, state the estimated amount of revenue likely to be produced annually. \$ \_\_\_\_\_.

14. Can the operation and maintenance of this project be absorbed in the workload of existing departmental personnel?

YES

NO

If NO, what expansion of personnel will be necessary?

\_\_\_\_\_

What will be the annual estimated cost of the new staff?

\$ \_\_\_\_\_

15. Will other facilities be abandoned or discontinued if this construction is carried out?

YES

NO

N/A

16. Will the project affect other city departments?

YES

NO

17. Project Justification: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_