

**TOWN OF PLYMOUTH CAPITAL IMPROVEMENT PLAN REQUEST FORM**  
**FY24 SPRING ANNUAL TOWN MEETING REQUEST FORM**

|                                       |                            |  |
|---------------------------------------|----------------------------|--|
| <b>Department:</b>                    | <b>Priority #:</b>         |  |
| <b>Project Title and Description:</b> | <b>Total Project Cost:</b> |  |

**Department/Division Head:** \_\_\_\_\_

**Check if project is:** New  Resubmitted  **Cost estimate was developed:** Internally  Externally

**For project re-submittals, list prior year(s):** \_\_\_\_\_

**List any funding sources and amounts already granted:** \_\_\_\_\_  
 \_\_\_\_\_

| <b>Basis of Estimated Costs (attach additional information if available)</b> |             |                 | <b>If project has impact on 5 Year Plan and future operating budgets, insert estimated amounts.</b> |                |                                     |
|------------------------------------------------------------------------------|-------------|-----------------|-----------------------------------------------------------------------------------------------------|----------------|-------------------------------------|
| <b>Capital:</b>                                                              | <b>Cost</b> | <b>Comments</b> | <b>Fiscal Year:</b>                                                                                 | <b>Capital</b> | <b>Operations &amp; Maintenance</b> |
| <i>Planning and Design</i>                                                   |             |                 | <i>FY23</i>                                                                                         |                |                                     |
| <i>Labor and Materials</i>                                                   |             |                 | <i>FY24</i>                                                                                         |                |                                     |
| <i>Administration</i>                                                        |             |                 | <i>FY25</i>                                                                                         |                |                                     |
| <i>Land Acquisition</i>                                                      |             |                 | <i>FY26</i>                                                                                         |                |                                     |
| <i>Equipment</i>                                                             |             |                 | <i>FY27</i>                                                                                         |                |                                     |
| <i>Other</i>                                                                 |             |                 |                                                                                                     |                |                                     |
| <i>Contingency</i>                                                           |             |                 |                                                                                                     |                |                                     |
| <b>Total Capital</b>                                                         |             |                 |                                                                                                     |                |                                     |

**Project Justification and Objective:** \_\_\_\_\_  
 \_\_\_\_\_

landing and takeoff calculations.

**For Capital Project Requests:**

Will this project be phased over more than one fiscal year? If yes, enter it on the 5 Year Plan

Can this project be phased over more than one fiscal year?

Yes  No

Yes  No

**For Capital Equipment Requests:**

Check if equipment requested is replacement and enter the year, make & model, VIN and present condition of existing equipment

|       |
|-------|
| _____ |
|-------|

**What is the expected lifespan of this new/replacement equipment:** \_\_\_\_\_

**Attach backup information, estimates, or justification to support this request.**