

**Board of Finance
Regular Meetings**

January 19, 2016
(Tues)

February 16, 2016
(Tues)

March 21, 2016

April 18, 2016

May 16, 2016
(7:30)

June 20, 2016
(7:30)

July 18, 2016
(7:30)

August 15, 2016
(7:30)

September 19, 2016

October 17, 2016

November 21, 2016

December 19, 2016

**TOWN OF EAST HAMPTON
EAST HAMPTON, CT 06424
BOARD OF FINANCE**

Meeting Agenda

Monday, December 19, 2016

6:30 PM

Location: Town Hall Meeting Room

1. Call to Order
2. Pledge of Allegiance
3. Approval of Minutes of Meeting(s) *
 - a) November 21, 2016 – Regular meeting
4. Public Remarks
5. Special Presentations
6. Correspondence
7. Status Reports (Financial)
8. Financial Transactions
9. New Business
 - a) Approval of the 2017 meeting dates *
 - b) 2017-2018 Budget Calendar *
 - c) 2018-2022 Capital Improvement Plan *
 - d) Discuss project financing for capital items (Fuel Island & Center School Boiler)
10. Continued Business
 - a) High School Renovation project status
11. Liaison's Reports
 - a) Town Council
 - b) Board of Education
 - c) Economic Development Commission
 - d) Lake / Conservation
 - e) Fire Commissioners
 - f) Brownfields/Redevelopment
 - g) Park & Rec. Advisory Board
 - h) Water Task Force
12. Public Remarks
13. Town Manager's Report
14. Adjournment

* - **Potential action item**

East Hampton Board of Finance

2017

Scheduled Meeting Dates

January 17, 2017 (Tues)

February 21, 2017 (Tues)

March 20, 2017

April 17, 2017

May 15, 2017 **(7:30)**

June 19, 2017 **(7:30)**

July 17, 2017 **(7:30)**

August 21, 2017 **(7:30)**

September 18, 2017

October 16, 2017

November 20, 2017

December 18, 2017

Location: Town Hall Meeting Room

Time: 6:30 PM (unless otherwise noted)

Approved:

Amended:

Budget Calendar Fiscal Year 2017-2018

Date	Description
January 23, 2017	Submit budget requests to Finance Department
February 06, 2017	Submit budget narratives to Finance Department
February 21, 2017 (Tues.)	Press Release on Budget workshop
February 28, 2017 (Tues.)	Press Release on Budget deliberations
March 13, 2017 (Mon.)	Board of Finance Regular Meeting - <u>Town and Board of Education Budget Presentation</u> (Review deliberations and gather input from public and other boards) Time: 6:00 Location: Middle School Library
March 14, 2017 (Tues.)	Budget workshop (6:00 - 8:30) Public Works / Police / Building Dept. / Capital
March 16, 2017 (Thur.)	Budget workshop (6:00 – 8:30) Fire Dept. / Emer. Mgmt. / EDC / Conservation / MHHL
March 17, 2017 (Fri.) *	Budget workshop (2:00 – 4:00) Senior Center / Library / Youth & Family Svs. / Park & Rec.
March 17, 2017 (Fri.) *	Budget workshop (4:00- 6:00) Board of Education
March 18, 2017 (Sat.)	Budget workshop (8:30 – 10:30) Town Operations
	*- Location: Library Community Room
March 20, 2017 (Mon.)	Board of Finance special meeting – Budget deliberations 6:30 PM Middle School Library
March 27, 2017 (Mon.)	Board of Finance public hearing (Middle School Library - 6:30PM)
March 29, 2017 (Wed.)	Board of Finance Special Meeting 6:30 P.M. (Middle School Library)
April 11, 2017 (Tues.)	Submit Board of Finance budget to members of Town Council
t/b/d	Town Council Special Meeting 6:30 P.M. – Adoption of Annual Budget
May 8, 2017 (Mon.)	Town meeting (Town Hall – 7:00 P.M.)
April/May 2017	Rivereast advertisement on budget
May 16, 2017 (Tues.)	Town VOTE (Middle School)
June 2017	Set mill rate

Note: All meetings to be held in the Town Hall meeting room except as noted above.
For more information call 860-267-4468.

The Town Council and Board of Education are invited and encouraged to attend all meetings

*** SCHEDULE SUBJECT TO CHANGE ***

12-8-2016

Category	Project Name	Funding	Status / Comments	2017 Approved	2018 Department	2018 Manager	2018 Committee	2019	2020	2021	2022	Available Balance
EDUCATION												
Buildings & Grounds	Asbestos abatement	General Fund	Open	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,000
Buildings & Grounds	Bathroom and copier room ventilation	General Fund	Open									15,000
Buildings & Grounds	Bathroom Partitions	General Fund	Spring									22,316
Buildings & Grounds	Ceiling Replacement	General Fund	To be completed in October									5,300
Buildings & Grounds	HVAC/RTU Replacement	General Fund	Going to bid in October	40,000								55,500
Buildings & Grounds	Lobby/Building Access Control	General Fund	Open									15,000
Buildings & Grounds	Media Center / PLC Flex Space	General Fund	On-hold									10,000
Buildings & Grounds	Replace grease traps in all school cafeterias	General Fund	Complete									1,261
Buildings & Grounds	School Safety	General Fund	In-process	30,000	30,000	30,000	30,000					22,030
Buildings & Grounds	School security grant match	General Fund	Complete									564
Buildings & Grounds	School Water System Upgrades	General Fund	Pending State audit									22,463
Buildings & Grounds	Track resurface sinking fund	General Fund	Open	15,000	15,000	15,000	15,000	20,000	20,000	20,000	20,000	174,420
Buildings and Grounds	Asbestos abatement	General Fund	NEW 2018		14,000	-	-					
Buildings and Grounds	Center School Boiler Replacement with Heating/HVAC Air Quality Upgrade	Finance	NEW 2018 (Looking for approval prior to 7-1-17)		1,085,000	1,085,000	-					
Buildings and Grounds	Floor Tile and Carpet	General Fund	NEW 2018		24,000	-	-					
Buildings and Grounds	HVAC RTU Equipment Replacement	General Fund	NEW 2018		40,000	-	-					
Buildings and Grounds	Middle School Accessible Walkway to Athletic Fields	General Fund	NEW 2018		15,000	-	-					
Buildings and Grounds	Bathroom Upgrades - All schools	General Fund	NEW 2018		12,000	-	-					
Equipment	Central Services Phone System Replacement	General Fund	In-process									2,621
Furniture & Fixtures	Classroom furniture	General Fund	In-process									3,924
Technology	Chromebooks - complete High School one to one - Lease Option - replaces/alternative to purchase above	Finance	NEW 2018		110,000		110,000					
Technology	Chromebooks - complete High School one to one - Purchase Option	General Fund	NEW 2018		110,000	110,000	-					
Technology	Infrastructure Securing at Middle School	General Fund	NEW 2018		25,000	-	25,000					
Technology	Technology Equip. / Network Upgrades (Switches & Software)	General Fund	In process	15,000								47,394
Technology	Upgrade Center School Wireless	General Fund	NEW 2018		32,000	-	32,000					
TOTAL EDUCATION				\$ 100,000	\$ 1,512,000	\$ 1,240,000	\$ 212,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 411,793
CULTURE & RECREATION												
Buildings & Grounds	Exterior Paint - Community Center	General Fund	NEW 2018		7,500	7,500	7,500					
Buildings & Grounds	Interior Paint - Community Center	General Fund	NEW 2018		10,000.0	-	-					
Buildings & Grounds	Playscape Replacement at Memorial School (Sinking Fund)	General Fund	Donations/Fund Raising	20,000.0	30,000.0	20,000.0	20,000.0	30,000.0	30,000.0			20,000.0
Buildings & Grounds	Roof Replacement - Community Center	General Fund	NEW 2018		89,000.0	89,000.0	89,000.0					
Buildings & Grounds	Soccer Field drainage improvements (H.S.)	General Fund	Phase II after fall soccer									8,441.6
Buildings and Grounds	Gate at Sears Park	General Fund	NEW 2018					10,000.0				
Buildings and Grounds	Sears Park Parking Lot	General Fund	NEW 2018		10,000.0			10,000.0	10,000.0	10,000.0	10,000.0	
Buildings and Grounds	Storage Unit/Shed	General Fund	NEW 2018		9,500.0							
Buildings and Grounds	Tennis Court Repairs	General Fund	NEW 2018		7,500.0			7,500.0	7,500.0	7,500.0	7,500.0	
Equipment	Infield Pro	General Fund	NEW 2018						15,000.0			
Equipment	Scag Turf Tiger	General Fund	Complete	13,964.0								
Equipment	Slice Seeder for Kubota tractor	General Fund	NEW 2018								8,000.0	
Vehicles	F-550 Dump Truck	General Fund	NEW 2018		54,316.0							
TOTAL CULTURE & RECREATION				\$ 33,964	\$ 217,816	\$ 116,500	\$ 116,500	\$ 57,500	\$ 62,500	\$ 25,500	\$ 17,500	\$ 28,442
GENERAL GOVERNMENT												
Buildings & Grounds	Natural Gas Building Upgrades	General Fund	Complete - Use balance to fund Fire Department			\$ -	\$ -					\$ 35,696
Buildings & Grounds	Parking Lot Paving/Upgrade	General Fund	NEW 2018		60,000			60,000				
Buildings & Grounds	Water Upgrade	General Fund	NEW 2018		100,000	50,000	100,000					
Land	Land acquisition - Town	General Fund	Open									8,162
Other	G.I.S. Mapping	General Fund	On-going					30,000				
Other	Mill rate stabilization	General Fund	On-going	-	-			-	-	-	-	232,608
Other	Revaluation	General Fund	Complete	-	25,000	25,000	25,000	30,000	35,000	40,000	45,000	37,287
Other	Rt. 66 Corridor Study (Grant Match)	General Fund	In process	17,500								17,500
Technology	Upgrade servers / printers	General Fund	On-going	9,814								236
Technology	Upgrade/Enhance Software	General Fund	On-going		18,000			18,000				4
Technology	Wide Format Color Scanner	General Fund	NEW 2018		10,000							
TOTAL GENERAL GOVERNMENT				\$ 27,314	\$ 213,000	\$ 75,000	\$ 125,000	\$ 138,000	\$ 35,000	\$ 40,000	\$ 45,000	\$ 331,492
HEALTH & HUMAN SERVICES												
Buildings & Grounds	Cemetery Improvement Sinking	General Fund	In-process									\$ 20,000

Category	Project Name	Funding	Status / Comments	2017 Approved	2018 Department	2018 Manager	2018 Committee	2019	2020	2021	2022	Available Balance
PUBLIC SAFETY												
Buildings & Grounds	Boiler Replacement - Fire Co. 1	General Fund	NEW 2018		\$ 30,000	\$ -	\$ 38,696					
Buildings & Grounds	Dry Hydrant Installations	General Fund	Open									12,984
Buildings & Grounds	Fire Department Facility Maintenance & Repair Sinking Fund	General Fund	Sinking Fund	39,500	50,000	50,000	50,000	50,000	50,000	50,000	50,000	-
Buildings & Grounds	Furnace Replacement Fire Co. 2	General Fund	NEW 2018		14,000	10,000	12,000					
Buildings & Grounds	New Police Station	Finance	NEW 2018		-			-	-	9,000,000	-	
Buildings & Grounds	Police Department Upgrades (Evidence & Processing)	General Fund	In-process									9,685
Buildings & Grounds	Renovate Co 1	Finance	NEW 2018							350,000		
Buildings & Grounds	Repave Lot and Apron - Fire Co. 1	General Fund	NEW 2018		50,000	-	-	50,000				
Equipment	Air Bottles	General Fund	On-going	14,000	-			-	-	20,000	20,000	47,662
Equipment	Fire Department Equipment & Repairs	General Fund	On-going									-
Equipment	Mobile Command Unit Equipment	General Fund	Complete									1,547
Equipment	Radio Equipment Upgrade	General Fund	Complete									-
Equipment	Radio System Upgrade	General Fund	NEW 2018		-			-	-	-	500,000	
Equipment	Rescue Boat Replacement	General Fund	Open - Addl. \$ from fund 22									20,000
Equipment	Trailers	General Fund	NEW 2018		20,000	20,000	20,000					
Equipment	Turnout gear	General Fund	On-going	18,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000	18,000
Equipment	UTV	General Fund	NEW 2018		20,000	20,000	20,000					
Other	Glastonbury Dispatch	General Fund	In process	55,000	55,000	62,500	62,500	7,500	7,500	7,500	7,500	208,537
Technology	Accountability System	General Fund	NEW 2018		15,000	-	-	7,500	7,500			
Technology	CAD (DMV) Upgrade	General Fund	NEW 2018		25,000	-	-	-	-	-	-	
Technology	Fire Department technology upgrades	General Fund	Move to operating									(29)
Vehicles	Cruisers and Conversion Equip.	General Fund	On-going	30,767	70,000	70,000	70,000	105,000	110,000	110,000	78,000	13,841
Vehicles	Replace Boat	General Fund	NEW 2018						30,000			
Vehicles	Replace Chief Vehicle	General Fund	NEW 2018					50,000				
Vehicles	Replace Engine 212	Finance	NEW 2018					700,000				
Vehicles	Replace Engine 312	Finance	NEW 2018								650,000	
Vehicles	Replace Rescue 212	General Fund	NEW 2018						100,000			
Vehicles	Replace tanker 112	Finance	NEW 2018							330,000		
Vehicles	Sinking Fund for Fire Department Rolling Stock	General Fund	Sinking Funds	40,000	100,000	75,000	75,000	125,000	150,000	175,000	200,000	40,000
Vehicles	UTV's	General Fund	Complete		-			-	-	-		231
TOTAL PUBLIC SAFETY				\$ 197,267	\$ 469,000	\$ 327,500	\$ 368,196	\$ 1,115,000	\$ 475,000	\$ 10,062,500	\$ 1,525,500	\$ 372,459
PUBLIC WORKS												
Buildings & Grounds	Chatham Historical Water/Sewer	General Fund	Closed									\$(1,332)
Buildings & Grounds	Fuel Island Repl/Reloc.	Finance	NEW 2018		450,000	450,000	450,000					
Buildings & Grounds	Fuel Tank remove/remediate/replace study	General Fund	In-process									6,910
Buildings & Grounds	Oakum Dock - St. Clements Easement	General Fund	Future site clean-up									57,013
Buildings & Grounds	Public Works Garage (Replace overhead doors)	General Fund	Complete	10,000	-			-	-	-	-	398
Equipment	Chipper	General Fund	NEW 2018		55,000	-	-	55,000				
Equipment	Cold Planer	General Fund	On order	25,000								271
Equipment	Curbing machine	General Fund	Not needed									-
Equipment	Material Screener	General Fund	Not needed									-
Equipment	Paver	Finance	NEW 2018		160,000	160,000	160,000					
Equipment	Replace cans & equipment trash recycling at Transfer station	General Fund	Sinking Fund	10,000								10,000
Equipment	Truck plows / sanders	General Fund	Sinking Fund	15,000	15,000	15,000	15,000	20,000	20,000	20,000	20,000	12,031
Roads / Sidewalks	Engineering Road Study	General Fund	In-process. S/B complete in Dec.	45,000								45,000
Roads / Sidewalks	Install infiltration catch basins in lake watershed	General Fund	Request \$ moved to Water Qlty.									30,000
Roads / Sidewalks	Road Repair / Maintenance	General Fund	On-going	224,004	250,000	250,000	250,000	275,000	300,000	325,000	350,000	150,170
Roads / Sidewalks	Road repairs (Private Roads)	General Fund	On-going	10,000	10,000	10,000	10,000	25,000	25,000	25,000	25,000	9,458
Roads / Sidewalks	Sidewalk repair and replacement	General Fund	On-going	10,000	50,000	25,000	25,000	40,000	40,000	40,000	40,000	2,690
Roads / Sidewalks	Water quality infrastructure improvements	General Fund	On-going	40,000	40,000	40,000	40,000	40,000	40,000	40,000	40,000	120,000
Vehicles	2 Plow Trucks	Finance	Complete	200,000								27,651
Vehicles	4X4 Pickup truck w/plow	General Fund	Complete	40,000								240
Vehicles	Large Dump/Plow Truck	General Fund	NEW 2018		200,000	-	-	200,000				
Vehicles	Vehicle equipment sinking fund	General Fund	On-going	40,000	100,000	50,000	50,000	125,000	150,000	175,000		40,800
TOTAL PUBLIC WORKS				\$ 669,004	\$ 1,330,000	\$ 1,000,000	\$ 1,000,000	\$ 780,000	\$ 575,000	\$ 625,000	\$ 475,000	\$ 511,301
TOTAL				\$ 1,027,549	\$ 3,741,816	\$ 2,759,000	\$ 1,821,696	\$ 2,110,500	\$ 1,167,500	\$ 10,773,000	\$ 2,083,000	\$ 1,675,487
TOTAL EDUCATION				\$ 100,000	\$ 1,512,000	\$ 1,240,000	\$ 212,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 411,793
TOTAL TOWN				\$ 927,549	\$ 2,229,816	\$ 1,519,000	\$ 1,609,696	\$ 2,090,500	\$ 1,147,500	\$ 10,753,000	\$ 2,063,000	\$ 1,263,694

Category	Project Name	Funding	Status / Comments	2017 Approved	2018 Department	2018 Manager	2018 Committee	2019	2020	2021	2022	Available Balance
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	2018	2018 Manager	2018 Committee
Cash	\$ 1,861,816	\$ 989,000	\$ 991,000
Finance	\$ 1,805,000	\$ 1,695,000	\$ 720,000
Natural Gas Project Balance			\$ 35,696
LOCIP	\$ 75,000	\$ 75,000	\$ 75,000
TOTAL	\$ 3,741,816	\$ 2,759,000	\$ 1,821,696

Financing Summary			
	2018	2018 Manager	2018 Committee
Center School Boiler Replacement	\$ 1,085,000	\$ 1,085,000	\$ -
Chromebooks	\$ 110,000		\$ 110,000
Fuel Island	\$ 450,000	\$ 450,000	\$ 450,000
Paving Box	\$ 160,000	\$ 160,000	\$ 160,000
TOTAL	\$ 1,805,000	\$ 1,695,000	\$ 720,000

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools
Enter the Department, and division, if applicable

CONTACT PERSON: Donald Harwood
Enter the name and telephone number of the person who can best answer detailed questions about this project.

Title of Request/Project Name: School Safety & Security Infrastructure
Enter the title best describing the project. Be concise, but as descriptive as possible.

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	30,000
2018	
2019	
2020	
2021	

1) Project Description: This is a year on year strategic approach to upgrade access control and physical security at Center, Memorial and Middle School. In addition, the Learning Center and Central Office are included. These on-going infrastructure changes align with the State of Connecticut All Hazards School Safety Infrastructure requirements. This is multiyear repeating fund and is designed to allow upgrades in phases.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): 20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

4) Justification: : Upgrade access control, monitoring and physical security to comply with the State of Connecticut School Safety/Security Infrastructure requirements. These mandatory and critical compliance areas include building perimeters, parking areas, recreational areas, communications, building exteriors, interior, roofs, critical assets, utilities and other defined areas. Upgrades will include, but not be limited to access control, monitoring and physical security to comply with the State of Connecticut School mandates.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? The project costs are estimated on a per school basis and may increase once the legislative approval occurs and specifics are finalized. This is a proactive approach so that a multi-year program focus can be established and a comprehensive program can be put in place to meet the safety and security objectives.

6) Additional Cost Data (Equipment Only)

- Purchase Price: Click here to enter text.
- Less Trade-In: Click here to enter text.
- \Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? At this time no additional funds have been identified, but there is a possibility that the state may augment with grants in the future similar to the School Security Competitive Grant Program

8) What will be the effect on your department if this project is delayed? Safety will be compromised and alignment with the State Standards will not be met.

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

- | | |
|---|---|
| Personnel Budget | Expense Budget: |
| <input type="checkbox"/> increase | <input type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input type="checkbox"/> decrease |
| <input type="checkbox"/> no change | <input checked="" type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. This is a District wide program impacting all locations.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided. [Click here to enter text.](#)

Signature

Date

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools
Enter the Department, and division, if applicable

CONTACT PERSON: Donald Harwood
Enter the name and telephone number of the person who can best answer detailed questions about this project.

Title of Request/Project Name: Track Resurfacing Sinking Fund
Enter the title best describing the project. Be concise, but as descriptive as possible.

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	15,000
2019	
2020	
2021	
2022	

1) Project Description: This is an ongoing sinking fund of capital dollars to fund the resurfacing of the High School track.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): 15

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: The track surface replacement has been an ongoing planned project. The funding has been done over several years in order to minimize a one year hit to the capital budget. The track is reaching its useful life and will be fully resurfaced to ensure a safe athletic space. Target date for resurfacing is set for 2021.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? The cost base and funding was pre-established by the Park & Recreation Department.

6) Additional Cost Data (Equipment Only)

- Purchase Price: [Click here to enter text.](#)
- Less Trade-In: [Click here to enter text.](#)
- \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? At this time no additional funds have been identified, but there is a possibility that the state may augment with grants in the future similar to the School Security Competitive Grant Program

8) What will be the effect on your department if this project is delayed? This is a long range planned project and has been funded on a yearly basis to meet a strategic replacement. Temporary repairs will need to be made this year to ensure viability for this track season. Actual replacement will be coordinated around site work resulting from the High School renovation project.

9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. The track is used by the High School Athletic Department as well as Town residents.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided. Click here to enter text.

Signature

Date

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools

Enter the Department, and division, if applicable

CONTACT PERSON: Donald Harwood

Enter the name and telephone number of the person who can best answer detailed questions about this project.

Title of Request/Project Name: Asbestos Abatement

Enter the title best describing the project. Be concise, but as descriptive as possible.

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	14,000
2019	
2020	
2021	
2022	

- 1) Project Description: This project is focused on the removal, abatement and air testing of asbestos related to mastics, tile and carpet. This project is aligned with the replacement of Vat/VCT and carpet throughout the schools.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) Useful Life (in years): N/A

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*

Other (please explain) Required component during demolition and disruption of asbestos laden materials. Material will be disposed of in accordance with State law.

* Please note how old equipment will be disposed of

4) Justification: It is a required element while removing contaminated products. This is for the abatement and air testing of asbestos related to mastics, tile and carpet. This capital project is aligned with the replacement of VAT/VCT and carpet throughout the school.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Based on estimated costs and previous on-site projects.

6) Additional Cost Data (Equipment Only)

Purchase Price: Click here to enter text.
 Less Trade-In: Click here to enter text.
 \Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? Not aware of additional funds being available.

8) What will be the effect on your department if this project is delayed? Replacement of interior finishes on a yearly planned basis provides for an on-going investment in maintaining and upgrading

of the real estate portfolio. Deferral of incremental yearly investments will result in larger requests in subsequent years.

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) **PROJECT LOCATION AND SERVICE AREA:** Give a brief description of the community impact the project will have as well as the area it will serve. This project is focused on occupied and circulation space within the building. These spaces are used daily by the students and the teaching staff.

11) **SIGNATURE:** The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided. [Click here to enter text.](#)

Signature

Date

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Donald A. Harwood
Enter the Department, and division, if applicable

CONTACT PERSON: Donald A. Harwood
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Boiler Heating/ HVAC Air Quality Upgrade
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Center School
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	\$890,000 to \$1,085,000
2019	
2020	
2021	
2022	

- 1) Project Description: Replace existing steam boiler with two (2) condensing style hot water boilers and associated project work.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) Useful Life (in years): 20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of
Material will be disposed of in accordance with State law. The boiler and fittings have asbestos containing materials.

4) Justification: The current steam boiler is beyond its useful life, it is an ongoing maintenance issue, is rotting out, has resulted in school being cancelled due to boiler failure and is operating on an infrastructure that is more than 50 years old.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Conceptual estimates were developed through an engineering consultant. Scope and competitive bidding required to ensure cost estimates.

6) Additional Cost Data (Equipment Only)

Purchase Price: Click here to enter text.
Less Trade-In: Click here to enter text.
Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? There is the possibility to secure energy efficiency offset funding along with the possibility of State support. However this is a low priority State funded project.

8) What will be the effect on your department if this project is delayed?

It is likely to have more malfunctions and school cancellations. In addition there is ongoing maintenance problems and operational expenses.

9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. This replacement will provide more continuity in performance, a more efficient operation, cost savings and more dependable heating.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Click here to enter text.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools
Enter the Department, and division, if applicable

CONTACT PERSON: Donald Harwood
Enter the name and telephone number of the person who can best answer detailed questions about this project.

Title of Request/Project Name: Floor Tile/Carpet
Enter the title best describing the project. Be concise, but as descriptive as possible.

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	24,000
2019	
2020	
2021	
2022	

1) Project Description: This project is targeted at removing VAT/VCT tile and carpet and replacing it with code compliant material.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): 20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: Remove and replace tile and carpet that is far beyond its useful life, contains asbestos or is not code compliant as a floor finish. The floor areas are currently chipping, splitting have moisture underneath or represent carpeted area that is posing unsafe conditions. Additionally, sub surface moisture barriers will be installed to minimize further damage and degradation where required.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? The pricing is based on square foot pricing.

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
Less Trade-In: [Click here to enter text.](#)
\Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? Not aware of any additional funding at this time.

8) What will be the effect on your department if this project is delayed? Replacement of interior finishes on a yearly planned basis provides for an on-going investment in maintaining the quality of the real estate portfolio. Deferral of incremental yearly investments will result in larger requests in subsequent years.

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Replacements are focused on occupied and circulation space within the building. These spaces are used daily by the students and the teaching staff.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided. [Click here to enter text.](#)

Signature

Date

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools

Enter the Department, and division, if applicable

CONTACT PERSON: Donald Harwood

Enter the name and telephone number of the person who can best answer detailed questions about this project.

Title of Request/Project Name: HVAC RTU Equipment Replacement

Enter the title best describing the project. Be concise, but as descriptive as possible.

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	40,000
2018	
2019	
2020	
2021	

1) Project Description: To replace existing HVAC RTU units that are beyond their useful life. The project includes a comprehensive replacement including all ancillary work.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): 15

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of:

The unit will be disposed of in accordance with current regulations addressing bulk waste, metal and related refrigerants.

- 4) Justification: The roof top units are being replaced because they are beyond their expected life spans. Units will be replaced with an energy efficient IECC compliant unit that will provide another 15+ years of expected service. Provide increased efficiency and energy cost savings.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

- 5) How did you determine the project's cost? The project cost is based on a previously replaced unit and a contractor estimate.

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
Less Trade-In: [Click here to enter text.](#)
\Net Cost: [Click here to enter text.](#)

- 7) Are non-Town revenues available to reduce cost (i.e. grants)? Not aware of additional funds being available.

8) What will be the effect on your department if this project is delayed? All units located at the Middle school have reached or exceeded their expected life span. This replacement is in line with managing a year on year strategic approach to replacing and upgrading equipment. It allows for incremental investments in a planned fashion vs. reacting in an unplanned failure reaction mode.

9) Please describe the effect of this project on your operating budget. It would be expected to reduce operating expenses due to the significant change in energy efficiencies since the original installation.

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. This will serve a portion of a wing at the Middle School

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Click here to enter text.

Signature

Date

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: EAST HAMPTON PUBLIC SCHOOLS

CONTACT PERSON: DONALD HARWOOD FACILITIES DIRECTOR 860-365-4000

Title of Request/Project Name: ACCESIBLE WALKWAY TO MIDDLE SCHOOL ATHLETIC FIELDS

This form should be used for capital items of \$10,000 and above.

Fiscal Year	Cost
2018	15,000
2019	
2020	
2021	
2022	

Project Description:

- 1) Develop an accessible gravel walkway in accordance with appropriate run and rise to accommodate those with disabilities. This walkway will be incorporated into existing path and provide a more code compliant continuous path to access the baseball and soccer fields. This represents the first phase of this accessibility path project. _____

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) Useful Life (in years): 20 _____

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) _____

* Please note how old equipment will be disposed of

4) Justification: The walkway will provide for a continuous path of travel for students, teachers and visitors to the Middle School fields. This accommodation will provide accessibility to those with disabilities.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? The cost is based on general estimates for initial grading and the installation of gravel.

6) Additional Cost Data (Equipment Only)

Purchase Price: _____
 Less Trade-In: _____
 Net Cost: _____

7) Are non-Town revenues available to reduce cost (i.e. grants)?
Not aware of any available funds to offset the project cost.

8) What will be the effect on your department if this project is delayed?

The development of an accessible pathway is a safety enhancement and provides a continuous path of travel to the Middle School fields. If project is delayed, a more code compliant path of travel will not be established.

9) Please describe the effect of this project on your operating budget.

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve.

There is a direct impact on the community if you are disabled and you are attending sporting or other public events at the Middle School fields.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Signature

Date

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools

Enter the Department, and division, if applicable

CONTACT PERSON: Donald Harwood

Enter the name and telephone number of the person who can best answer detailed questions about this project.

Title of Request/Project Name: Bathroom Upgrades

Enter the title best describing the project. Be concise, but as descriptive as possible.

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	12,000
2019	
2020	
2021	
2022	

- 1) Project Description: This project is focused on refurbishing selected bathrooms to replace fixtures, partitions, interior finishes and associated plumbing. ADA compliant upgrades are included.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) Useful Life (in years): 20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: Remove, replace and refurbish selected bathroom finishes to ensure proper operation, code compliance, and to reduce plumbing problems.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Estimated costs based on limited fixture replacement and square footage costs.

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
 Less Trade-In: [Click here to enter text.](#)
 \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? Not aware of any additional funding at this time.

8) What will be the effect on your department if this project is delayed? ? Replacement of interior finishes on a yearly planned basis provides for an on-going investment in maintaining the quality of

the real estate portfolio. Deferral of incremental yearly investments will result in larger requests in subsequent years.

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. . Replacements are focused on the bathrooms that are in the worst shape and where plumbing problems have routinely occurred. These spaces are used daily by the students and the teaching staff.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided. [Click here to enter text.](#)

Signature

Date

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools
Enter the Department, and division, if applicable

CONTACT PERSON: Richard Fielding
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Chromebooks – Lease Option B
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: High School and Middle School
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	30,000
2019	30,000
2020	30,000
2021	30,000
2022	

- 1) Project Description: Implement one-to-one Chromebooks at the High School, relocating existing devices. Assign new Chromebooks to grades 6, 9, and 10. Cost is to purchase 400 at \$275 each. Based on assumption acquiring of \$135 Chromebooks from current capital allocation.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) Useful Life (in years): Four

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

- 4) Justification: [Click here to enter text.](#) Student outcomes are maximized when the ratio of students per computer is one-to-one. Students can connect to the world of resources online, collaborate with peers and teachers, work at their own pace, and access schoolwork after school and on weekends at home. Instruction time is maximized when all participants are utilizing the same device. The district has been steadily improving Chromebook access through strategic purchasing including the State of Connecticut Technology Grant for Schools. The grant funds were used to supplement local funds permitting the purchase learning devices for all Middle School students. Chromebooks support learning as we transition to the Common Core State Standards and SMARTER Balanced (SBAC) assessments. High School devices are a natural extension of our Middle School program.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

- 5) How did you determine the project's cost? Current pricing of Chromebooks

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
 Less Trade-In: [Click here to enter text.](#)
 \Net Cost: [Click here to enter text.](#)

- 7) Are non-Town revenues available to reduce cost (i.e. grants)? [Click here to enter text.](#)

8) What will be the effect on your department if this project is delayed?
Click here to enter text.

9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Click here to enter text.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.
Click here to enter text.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools
Enter the Department, and division, if applicable

CONTACT PERSON: Richard Fielding
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Chromebooks – Purchase Option A
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: High School and Middle School
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	110,000
2019	
2020	
2021	
2022	

- 1) Project Description: Implement one-to-one Chromebooks at the High School, relocating existing devices. Assign new Chromebooks to grades 6, 9, and 10. Cost is to purchase 400 at \$275 each. Based on assumption acquiring of \$135 Chromebooks from current capital allocation.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) Useful Life (in years): Four

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: [Click here to enter text.](#) Student outcomes are maximized when the ratio of students per computer is one-to-one. Students can connect to the world of resources online, collaborate with peers and teachers, work at their own pace, and access schoolwork after school and on weekends at home. Instruction time is maximized when all participants are utilizing the same device. The district has been steadily improving Chromebook access through strategic purchasing including the State of Connecticut Technology Grant for Schools. The grant funds were used to supplement local funds permitting the purchase learning devices for all Middle School students. Chromebooks support learning as we transition to the Common Core State Standards and SMARTER Balanced (SBAC) assessments. High School devices are a natural extension of our Middle School program.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Current pricing of Chromebooks

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
Less Trade-In: [Click here to enter text.](#)
Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? [Click here to enter text.](#)

8) What will be the effect on your department if this project is delayed?
Click here to enter text.

9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Click here to enter text.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.
Click here to enter text.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools
Enter the Department, and division, if applicable

CONTACT PERSON: Rich Fielding
Enter the name of the person who can best answer detailed questions about this project.

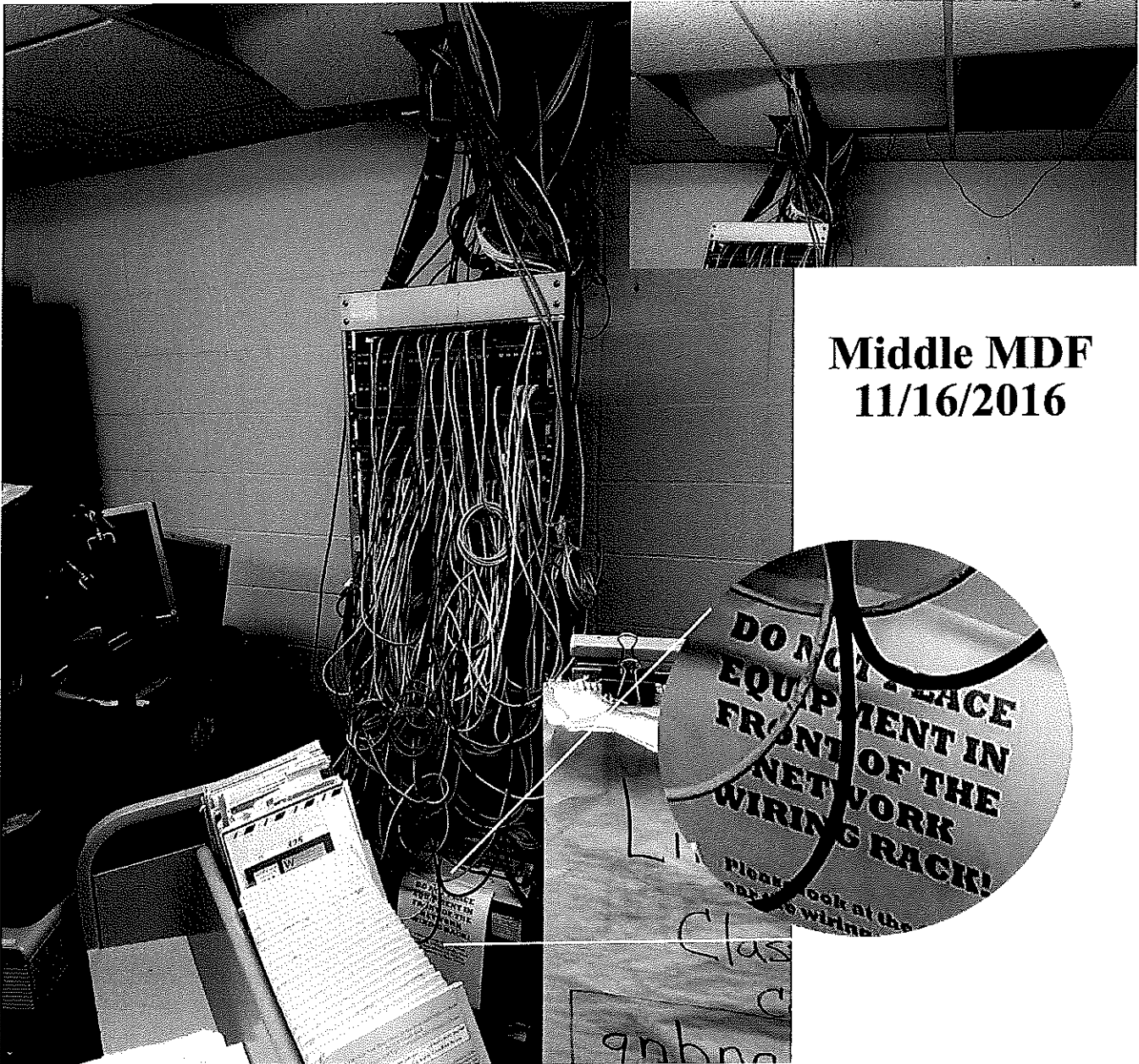
TITLE OF REQUEST/PROJECT NAME: Infrastructure Securing at Middle School
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Middle School
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	25,000
2019	
2020	
2021	
2022	

- 1) Project Description: The primary network closet (MDF) located in a closet off the library is in severe need of an upgrade and securing. Currently the rack is unprotected from the area around it and is a hazard. As the center of the Middle School network, the equipment needs to be well protected and sufficient power redundancy needs to be put in place. A new enclosure will be required as well as a significant amount of work to clean up and reroute existing wiring. Additionally, the IDF located in the Main Office (IDF2) is also unsecured. There is nowhere to mount a switch, so currently it sits on a decommissioned server. We would like a small enclosure to put the rack and switch in so they are protected.



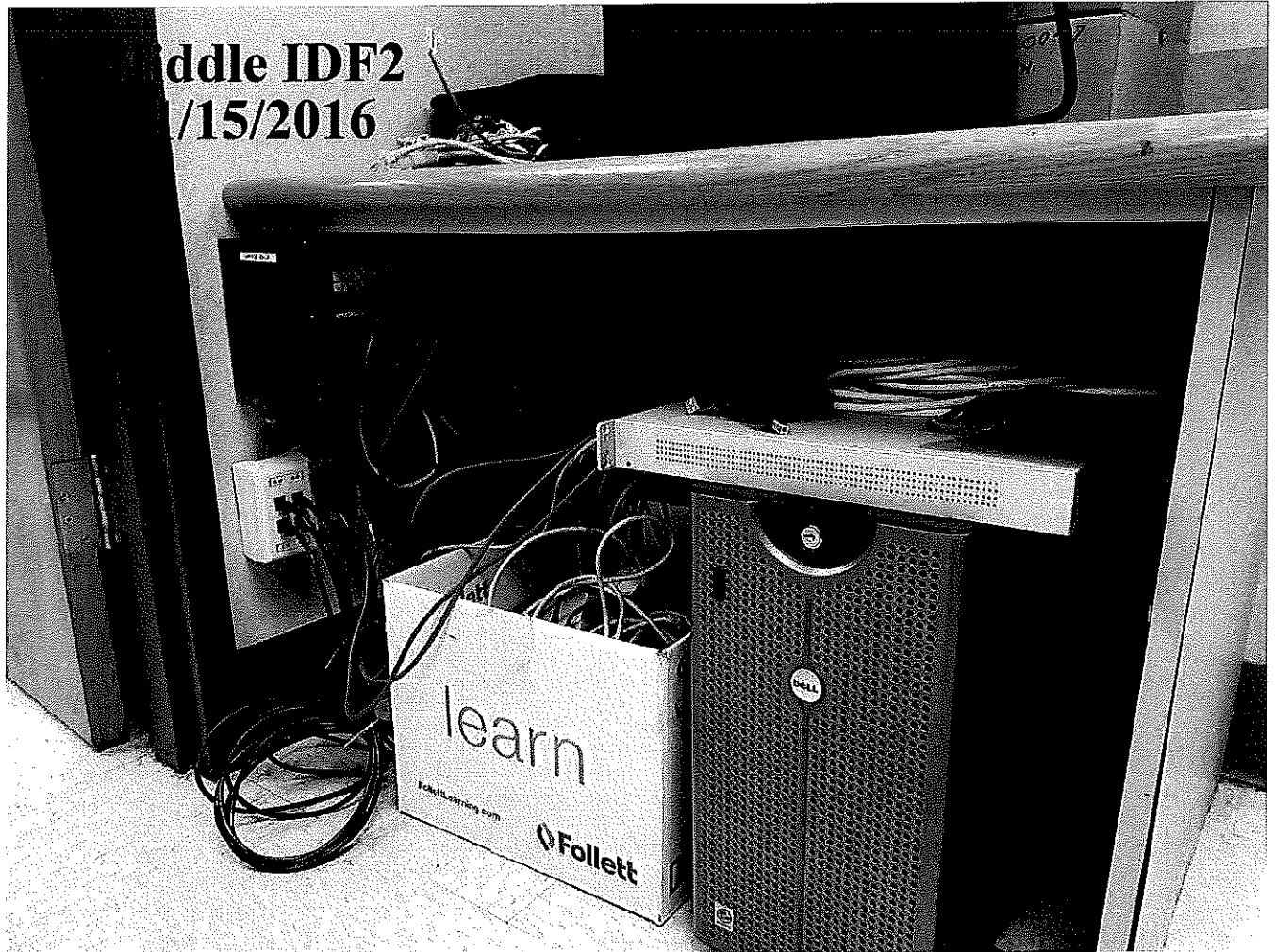
**Middle MDF
11/16/2016**

**DO NOT PLACE
EQUIPMENT IN
FRONT OF THE
NETWORK
WIRING RACK!**

Please look at the
...to wiring

Class

gnbna



Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): Ten

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: The current equipment is unprotected and unsafe. It is also very difficult to troubleshoot or work on the MDF.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Current pricing of network enclosures and anticipated hours to rewire parts of the MDF by licensed electrician.

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
 Less Trade-In: [Click here to enter text.](#)
 \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? [Click here to enter text.](#)

8) What will be the effect on your department if this project is delayed?

Continued delay in troubleshooting network issues at Middle School. Continued high likelihood of network failures.

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. [Click here to enter text.](#)

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided. [Click here to enter text.](#)

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: East Hampton Public Schools
Enter the Department, and division, if applicable

CONTACT PERSON: Rich Fielding
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Wireless improvements at Center School
Enter the title best describing the project. Be concise, but as descriptive as possible.

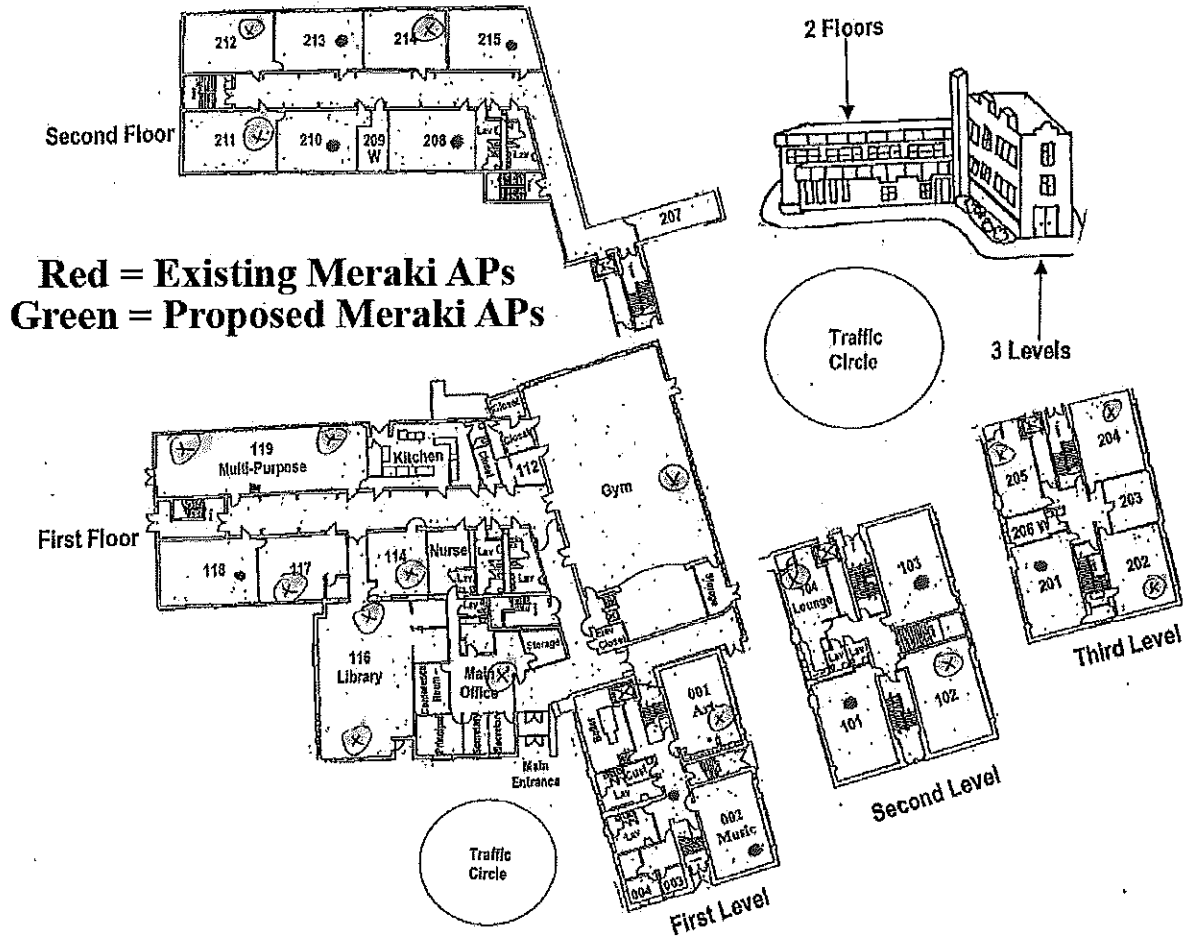
LOCATION OF PROJECT: Center School
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	32,000
2019	
2020	
2021	
2022	

1) Project Description: The Center School has two different wireless network (WiFi) technologies currently in place. The original Xirrius Wireless Access Points (APs) are end of life and insufficient to allow for the network density now required to accommodate the number of wireless devices. Additionally, many of the Xirrius and newer Meraki APs were installed using existing, outdated Category 5 (CAT 5) network cable, which is substandard for the types of devices in place. Also, many of the newer Meraki devices are not secured to the ceilings, but are plugged into wall jacks and often stored on, or under, desks where they are vulnerable to tampering and do not provide the best signal strength. To properly accommodate the wireless needs of Center School, the existing Meraki APs should be ceiling mounted in their classrooms with new Category 6 (CAT 6) Ethernet cables run directly to either the MDF or IDF, whichever is closer. In addition, new Meraki APs should be purchased and installed in any classroom that does not already have one, with new CAT 6 lines run as well. This mean 10 existing APs would be moved and rewired, and 17 new APs would be purchase and wired. At the same time, all Xirrius APs would need to be removed.

Center School Proposed WiFi



Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): Ten

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

4) Justification: Current wireless network at Center School does not support the required student testing. Student equity is impacted as scheduling for test taking varies throughout the building. The improvement is also required to advance towards a one-to-one device future.

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Current pricing of Meraki MR34 Access points are approximately \$1,100 with a 3 year license. For 17 of these, $17 \times \$1,100 = \$18,700$. Running of 27 new Category 6 Ethernet runs and required patch panels in existing MDF and IDF. Estimate of \$500 per run = \$13,500. Total is \$32,200

6) Additional Cost Data (Equipment Only)

Purchase Price: Click here to enter text.
 Less Trade-In: Click here to enter text.
 \Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? Click here to enter text.

8) What will be the effect on your department if this project is delayed?

Click here to enter text.

9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Click here to enter text.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided. Click here to enter text.

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Facilities Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Exterior Paint (south and east wall – minimum)**

LOCATION OF PROJECT: Community Center building, 105 Main Street

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	7,500.00
2019	
2020	
2021	
2022	

- 1) Project Description: Exterior Paint, south and east wall (at minimum), CommunityCenter
- 2) Useful Life (in years): 8-10

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: [Click here to enter text.](#)

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? [Click here to enter text.](#)

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
 Less Trade-In: [Click here to enter text.](#)
 \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
 Continued costly repairs and further degradation of the Center's exterior.

9) Please describe the effect of this project on your operating budget. Most repairs are paid for from operating budget funds.

Personnel Budget

- increase
- decrease
- no change
- amount of change

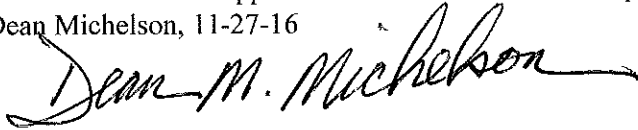
Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Community Center, 105 Main Street. The Senior Center and the East Hampton Library serve East Hampton residents as well as surrounding town residents.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16



**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Parks and Recreation Department

CONTACT PERSON: Jeremy Hall

Title of Request/Project Name: Seamster Park Playground

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	30,000
2018	30,000
2019	
2020	
2021	

- 1) Project Description: Seamster Park Playground
- 2) Useful Life (in years): undetermined

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

4) Justification: Parks and Recreation has been in need of rebuilding a new state of the art playground at the Seamster Park Playground located at the Memorial School site. This is the largest and most used playground in town. It is important to rebuild as the insurance carrier Trident Insurance has deemed the playground unsafe and unrepairable. The projected build date for this project is the second week of April 2018. We are requesting these funds in addition to donations, grants and fundraising efforts.

5) How did you determine the project's cost? An estimate was provided by Play By Designs who will be the contractor on this project

6) Are non-Town revenues available to reduce cost (i.e. grants)? Yes

7) What will be the effect on your department if this project is delayed? A delay in the building process

8) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
 decrease
 no change
 amount of change

Expense Budget:

- increase
 decrease
 no change
 amount of change

9) PROJECT LOCATION AND SERVICE AREA: Memorial School/Little league fields area

10) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Jeremy Hall

Jeremy Hall

Signature

11/15/16

Date

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Facilities Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: Roof Replacement, Community Center Building

LOCATION OF PROJECT: Community Center Building, 105 Main Street

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	89,500.00
2019	
2020	
2021	
2022	

- 1) Project Description: Complete roof replacement, entire structure
- 2) Useful Life (in years): 20



3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of (recycled wherever possible)

4) Justification: Community Center building has been experiencing leaks for several years. Ice dams lead to more leakage, damaging exterior as well as interior structure and content. Health and Safety concerns (leaks, mold, etc.) are of great concern.

5) How did you determine the project's cost? Estimate

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
Less Trade-In: [Click here to enter text.](#)
Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
Continued leaking roof and possible interior damage as well as the contents of the building.

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

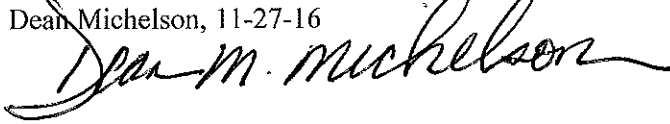
Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input checked="" type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Community Center Building, 105 Main Street. This building serves

as the Senior Center, serving many East Hampton residents, and is used for Town Meetings as well. The Library area serves East Hampton and surrounding towns, with many programs.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16

A handwritten signature in cursive script that reads "Dean M. Michelson". The signature is written in black ink and is positioned below the typed name and date.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Parks and Recreation Department

CONTACT PERSON: Jeremy Hall

Title of Request/Project Name: Gate at Sears Park

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	
2018	
2019	10,000
2020	
2021	

- 1) Project Description: Automatic Gate at Sears Park Entrance
- 2) Useful Life (in years): undetermined

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

- 4) Justification: Parks and Recreation is looking for a more cost effective and better approach to patrons of town utilizing Sears Park for parking as well as minimizing the amount of non-residents entering the park to launch their boats and park in the parking lot. This addition to the park will also allow the parks and recreation department to decrease the hours per day that we would need to staff a gate attendant. We currently staff for 14.5 hours a day from Memorial Day to Labor Day, this would allow us to decrease the hours to 5 hours a day during our busiest times of 12-5:00pm. This would also decrease the cost to the town budget roughly \$9,000 a year. In addition, the scanning system would allow us to monitor those who are in the park and how much the park is used and during which times of the day are busiest.
- 5) How did you determine the project's cost? An estimate was provided by Eagle Fence company out of Plainville and Arrow Fence.
- 6) Are non-Town revenues available to reduce cost (i.e. grants)? Yes, reinstate admission fees for park patrons with sticker purchase to help offset cost of scan tags.
- 7) What will be the effect on your department if this project is delayed? A continuation of inconsistent monitoring of cars entering without stickers to use the park and the boat launch.
- 8) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
 decrease
 no change
 amount of change

Expense Budget:

- increase
 decrease
 no change
 amount of change

9) PROJECT LOCATION AND SERVICE AREA: Sears Park

10) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Jeremy Hall

Jeremy Hall

Signature

11/15/16

Date

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Parks and Recreation Department

CONTACT PERSON: Jeremy Hall

Title of Request/Project Name: Sears Park Parking Lot Repair

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	10,000
2018	10,000
2019	10,000
2020	10,000
2021	10,000

Project Description: The following is a proposal to furnish and install 3/4" process trap rock on the parking area in Sears Park. We will place the process in a +/- 2" layer and compact. The broken asphalt at the pavement entrance and exit will be cut back to a neat line and disposed off site. We will make every attempt to establish a smooth grade around the existing rock that protrudes in the existing lot. The next 5+ years will serve as a sinking fund to help compile money to replace the upper parking lot with porous pavers to help reduce runoff into the lake.

1) Useful Life (in years): 5 years

2) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

3) Justification: Repair to the upper parking lot is in dire need and will cost roughly \$9,000 this year, this is a temporary fix for the next 5 years where we will put aside \$10,000 in capital dollars each year until we raise \$60,000 to build porous pavers as the new parking lot. This would help with water run-off and would be a long term fix as well as a beautification factor for the park.

4) How did you determine the project's cost? Estimate provided by Butler Construction

5) Are non-Town revenues available to reduce cost (i.e. grants)? no

6) What will be the effect on your department if this project is delayed? Delay in replacing an already eroding parking lot

7) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
 decrease
 no change
 amount of change

Expense Budget:

- increase
 decrease
 no change
 amount of change

8) PROJECT LOCATION AND SERVICE AREA: Sears Park

9) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Jeremy Hall

Jeremy Hall

Signature

11/15/2016

Date

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Parks and Recreation Department

CONTACT PERSON: Jeremy Hall

Title of Request/Project Name: Storage Unit for equipment

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	9,500
2018	
2019	
2020	
2021	

- 1) Project Description: This capital project will focus on adding one small 27' by 14' shed to the high school for storage of equipment.

- 2) Useful Life (in years): undetermined

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: Parks and Recreation has increased equipment for both parks maintenance and programs. We have lost storage space do to renovation of high school and tearing out approx. 7,000 sqft of storage space. We have added one more Scag Mower, an ice rink and multiple different attachment pieces that help to groom fields during the spring, summer and fall months.

5) How did you determine the project's cost? We received an estimate from Klotter Farms in Ellington CT

6) Are non-Town revenues available to reduce cost (i.e. grants)? no

7) What will be the effect on your department if this project is delayed? We would need to rent storage space at a cost of \$120 a month.

8) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

- | | |
|--|--|
| Personnel Budget | Expense Budget: |
| <input checked="" type="checkbox"/> increase | <input checked="" type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input type="checkbox"/> decrease |
| <input type="checkbox"/> no change | <input type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

9) PROJECT LOCATION AND SERVICE AREA: High School Sports Fields

10) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Jeremy Hall

Jeremy Hall

Signature _____

_11/15/16_____

Date

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Parks and Recreation Department

CONTACT PERSON: Jeremy Hall

Title of Request/Project Name: Tennis Court Repairs at Sears Park and High School

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	7,500
2018	7,500
2019	7,500
2020	7,500
2021	7,500

- 1) Project Description: Sinking Fund to help replace tennis courts at Sears Park and High School
- 2) Useful Life (in years): Yearly

3) Purpose:

- | | |
|---|--|
| <input type="checkbox"/> Scheduled Replacement* | <input type="checkbox"/> Increased Personnel Efficiency |
| <input type="checkbox"/> New/Expanded Service | <input checked="" type="checkbox"/> Replace Obsolete/Unsafe Equipment* |
| <input type="checkbox"/> Other (please explain) Click here to enter text. | |

* Please note how old equipment will be disposed of

4) Justification: The average lifespan in the Northeast for outdoor tennis courts is 8 years, this request would help to install new tennis courts at the high school and Sears Park after 6 years of funding.

5) How did you determine the project's cost? The cost is based on asphalt costs and labor per square footage of area.

6) Are non-Town revenues available to reduce cost (i.e. grants)? no

7) What will be the effect on your department if this project is delayed? Unsafe and inadequate playing areas for residents in town.

8) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

9) PROJECT LOCATION AND SERVICE AREA: Sears Park and high school

10) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Jeremy Hall

Jeremy Hall

Signature

11/15/16

Date

Town of East Hampton
FY 2017-2018 Capital Decision Package

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Jeremy Hall Parks and Recreation
Enter the Department, and division, if applicable

CONTACT PERSON: Jeremy Hall 860-267-7300

Title of Request/Project Name: F-550 Dump Truck

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2017	54,316.25
2018	
2019	
2020	
2021	

- 1) Project Description: This particular item has been requested by the Parks and Recreation Department to help maximize time and reduce 3rd party outsourcing during spring and summer months. Currently the Parks crew, in particular the summer time crew would use this dump truck to help transport brush, stone, mulch, gravel and clay for Sears Park, ball fields and community gardens throughout town. It would also help to transport employees to two different locations rather than scheduling a drop off of another employee at a different location resulting in time wasted during work hours.

- 2) Useful Life (in years): 15 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: This will help to eliminate excess cost for delivery of product from outside vendors and will allow for less time to transport and dump product. It will allow the Parks and Recreation staff to be more flexible with completing tasks as it is often difficult to schedule the use of a dump truck with PW, therefore resulting in manually shoveling product out of a pickup truck then using a wheel barrel to move product to destination. This results in several hours of work that could be cut in half with a dump truck.

5) How did you determine the project's cost? State contract # 10psx0239 for purchase of vehicle and state contract # 13psx0146 for the body of the dump truck.

6) Are non-Town revenues available to reduce cost (i.e. grants)? no

7) What will be the effect on your department if this project is delayed? With the increase in work load it will put the Parks crew behind schedule on mowing during the summer months to stop and put down mulch or spread gravel. The dump truck could help expedite these projects by one or more days.

8) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
 decrease
 no change
 amount of change

Expense Budget:

- increase
 decrease
 no change
 amount of change

9) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Jeremy Hall

Jeremy Hall

11/14/16

Signature

Date

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Facilities Department

CONTACT PERSON: Dean Michelson, 860-267-4747

TITLE OF REQUEST/PROJECT NAME: **Pave Town Hall Parking Lot**

LOCATION OF PROJECT: Click here to enter text.
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	60,000.
2019	
2020	
2021	
2022	

- 1) Project Description: Repave Town Hall Parking lot (all Town-owned sections), excluding Eversource access road, in order to create a safer surface along with more parking spaces, as well as the mandated number of handicapped spaces.
- 2) Useful Life (in years): 15-20 years.

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) Upgraded, additional parking spaces.

* Please note how old equipment will be disposed of

4) Justification: There is an inadequate number of parking spaces at Town Hall at present for both employees and the public. This improvement would benefit the entire community as well as all staff and business visitors.

5) How did you determine the project's cost? Contractor's estimate

6) Additional Cost Data (Equipment Only)

Purchase Price: 60,000
 Less Trade-In: 0
 \Net Cost: 60,000

7) Are non-Town revenues available to reduce cost (i.e. grants. No.

8) What will be the effect on your department if this project is delayed?

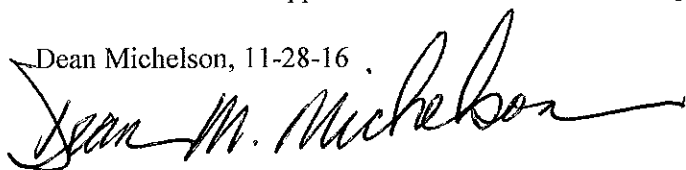
Parking at Town Hall will continue to deteriorate, will continue to be inadequate in number for the public and staff, and the number of handicapped accessible spots will continue to be inadequate.

9) Please describe the effect of this project on your operating budget. Less repair costs

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input checked="" type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Town Hall, Police Department offices, and Building/Planning/Zoning offices. The service area is the Town of East Hampton's residents, business visitors, and staff.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-28-16


Town Manager's Use

Approved:	
Not Approved:	
Other:	

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

SUBMITTED BY: Facilities Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Upgrade Water System at Town Hall Building**

LOCATION OF PROJECT: Town Hall, Main Building, 20 East High Street

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	100,000.00
2019	
2020	
2021	
2022	

1) Project Description: Upgrade Water System

2) Useful Life (in years): 20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of (recycle parts where possible)

4) Justification: Extensive repairs to keep system running and filtered have been experienced. Health and Safety of employees and patrons of Town Hall is a concern.

5) How did you determine the project's cost? Health Department estimate

6) Additional Cost Data (Equipment Only)

Purchase Price: Click here to enter text.
 Less Trade-In: Click here to enter text.
 \Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?

Continued costly repairs will continue. Filtration will continue to be a challenge.

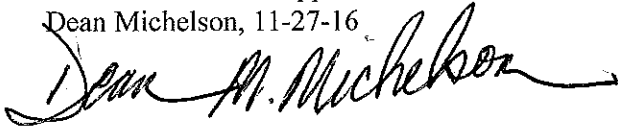
9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input checked="" type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Lower level, Main Building, Town Hall, 20 East High Street

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16

A handwritten signature in black ink that reads "Dean M. Michelson". The signature is written in a cursive style with a long, sweeping tail that extends to the right.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Facilities Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Boiler Replacement, Fire Company #1**

LOCATION OF PROJECT: Fire Co. #1, Barton Hill Rd.

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	30,000.00
2019	
2020	
2021	
2022	

1) Project Description: Boiler Replacement

2) Useful Life (in years): 20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of (recycled whenever possible)

4) Justification: Equipment obsolete, cannot obtain parts in a timely manner to keep operating; costs are high, many repairs necessary to keep present boiler working.

5) How did you determine the project's cost? Estimate

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
Less Trade-In: [Click here to enter text.](#)
Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
Further breakdowns/malfunctions, more repair costs.

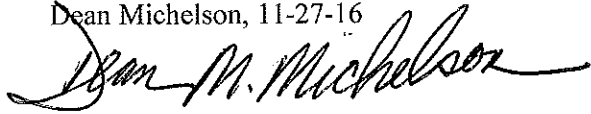
9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input checked="" type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Fire Co. #1, Barton Hill Rd.,

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16

A handwritten signature in cursive script that reads "Dean M. Michelson". The signature is written in black ink and is positioned below the typed name and date.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Brett J. Salafia, Chairman Board of Fire Commissioners
Enter the Department, and division, if applicable

CONTACT PERSON: Chief Greg Voelker
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Building Repair Sinking Fund
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Company 1 Firehouse
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	\$50,000
2019	\$50,000
2020	\$50,000
2021	\$50,000
2022	\$50,000

1) **Project Description:** Continue to work at maintaining the 3 physical firehouse locations to meet modern day building code requirements, basic standards of habitability, and to better protect the town's investment in fire apparatus. These will include upgrades to office, storage, and environmental concerns. These buildings have been essential neglected for numerous years

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) **Useful Life (in years):** 15 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Necessary accessory for Polaris UTV's

* Please note how old equipment will be disposed of

4) Justification: The JLN report commissioned in 2012 by the town council underscores a variety of deficiencies in the fire departments physical plant and apparatus. This sinking fund will allow the fire department to work each year to remediate these deficiencies which exist through a pattern of neglect. Other departments in the town have facility management staff. The fire department, through the BOFC must effort to maintain their own physical plant, despite being a fully volunteer organization

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Ongoing

6) Additional Cost Data (Equipment Only)

Purchase Price:	50,000
Less Trade-In:	Click here to enter text.
\Net Cost:	50000

7) Are non-Town revenues available to reduce cost (i.e. grants)? [Click here to enter text.](#)

No

8) What will be the effect on your department if this project is delayed?

Continued neglect will put these buildings into further disrepair, ultimately putting the town's investment in fire apparatus at risk of early depreciation. The condition of the buildings is also detrimental to department morale, making it difficult to retain the best volunteer staff

9) Please describe the effect of this project on your operating budget. Click here to enter text.

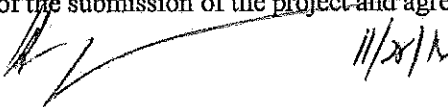
- | | |
|---|---|
| Personnel Budget | Expense Budget: |
| <input type="checkbox"/> increase | <input type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input type="checkbox"/> decrease |
| <input checked="" type="checkbox"/> no change | <input checked="" type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. This project would serve any and all emergency calls for service in town that need this type of apparatus to complete the department mission of protecting life and property

All 3 firehouse locations

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Click here to enter text.



**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Facilities Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Furnace Replacement, Fire Co. #2.**

LOCATION OF PROJECT: Fire Department, Co. #2, Cobalt

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	14,000.00
2019	
2020	
2021	
2022	

1) Project Description: Furnace Replacement, Fire Co. #2

2) Useful Life (in years): 20

3) Purpose:

- | | |
|---|--|
| <input type="checkbox"/> Scheduled Replacement* | <input type="checkbox"/> Increased Personnel Efficiency |
| <input type="checkbox"/> New/Expanded Service | <input checked="" type="checkbox"/> Replace Obsolete/Unsafe Equipment* |
| <input type="checkbox"/> Other (please explain) Click here to enter text. | |

* Please note how old equipment will be disposed of (recycled where possible)

4) Justification: Costly repairs have been experienced and gas furnace can be utilized, realizing fuel savings.

5) How did you determine the project's cost? Estimate

6) Additional Cost Data (Equipment Only)

Purchase Price:	Click here to enter text.
Less Trade-In:	Click here to enter text.
Net Cost:	Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
Further breakdowns and costly repairs would continue and fuel costs would remain higher.

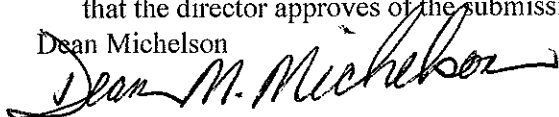
9) Please describe the effect of this project on your operating budget. Less repair costs.

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input type="checkbox"/> decrease
<input type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Fire Department, Co. #2. Cobalt. East Hampton and surrounding towns are serviced by this Fire Company.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson

A handwritten signature in black ink that reads "Dean M. Michelson". The signature is written in a cursive style with a long horizontal flourish at the end.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Brett J. Salafia, Chairman Board of Fire Commissioners
Enter the Department, and division, if applicable

CONTACT PERSON: Chief Greg Voelker
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Parking Lot and Apron Repaving
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Company 1 Firehouse
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	\$50,000
2019	
2020	
2021	
2022	

- 1) **Project Description:** Repaving apron in front of company one firehouse bays to provide safe entry and exit for fire apparatus. The project includes repaving main parking area where volunteers park when responding to calls. This parking area also serves as public parking for individuals conducting business with fire marshal

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) **Useful Life (in years):** 15 years unless damaged
3) **Purpose:**

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*

Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

4) Justification: Many years of neglect have caused an uneven and unsafe surface making normal use difficult. It also creates a difficult situation for town plow crews to conduct efficient snow removal

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Pricing secured through discussions with public works director

6) Additional Cost Data (Equipment Only)

Purchase Price:

Less Trade-In: Click here to enter text.

\Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? Click here to enter text.

8) What will be the effect on your department if this project is delayed?
Hamper ability to fight fires in remote or wooded locations

9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

increase

decrease

no change

Expense Budget:

increase

decrease

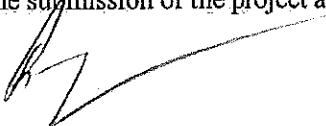
no change

amount of change

amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. This project would serve any and all emergency calls for service in town that require firefighters or apparatus from Company 1

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.
Click here to enter text.

 11/28/16

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Brett J. Salafia, Chairman Board of Fire Commissioners
Enter the Department, and division, if applicable

CONTACT PERSON: Chief Greg Voelker
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: 2 Trailers
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Company 1 Firehouse
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	\$20,000
2019	
2020	
2021	
2022	

- 1) **Project Description:** Purchase 2 Enclosed trailers to transport Polaris ATV's and wilderness Firefighting equipment to calls for service in town. These trailers would also serve as locked and covered storage for UTV's

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) **Useful Life (in years):** 15 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Necessary accessory for Polaris UTV's

* Please note how old equipment will be disposed of

4) Justification: The loss of the circa 1950's forestry trucks severely limits the ability of the department to fight brush fires and engage in other firefighting activities in remote locations in town. Without this type of equipment, the fire department would be unable to deal with situations in remote or wooded areas. These trailers would allow for more effective deployment of UTV's to service these special call types

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Research by fire chief

6) Additional Cost Data (Equipment Only)

Purchase Price: 20,000 (10K per each)
 Less Trade-In: Click here to enter text.
 \Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? Click here to enter text.

No

8) What will be the effect on your department if this project is delayed?

Hamper ability to fight fires in remote or wooded locations by delaying deployment of UTV's

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) **PROJECT LOCATION AND SERVICE AREA:** Give a brief description of the community impact the project will have as well as the area it will serve. This project would serve any and all emergency calls for service in town that need this type of apparatus to complete the department mission of protecting life and property

11) **SIGNATURE:** The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.
[Click here to enter text.](#)



A handwritten signature in black ink, followed by the date 11/28/16.

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Brett J. Salafia, Chairman Board of Fire Commisioners
Enter the Department, and division, if applicable

CONTACT PERSON: Chief Greg Voelker
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Turnout Gear Sinking Fund
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Company 1 Firehouse
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	\$20,000
2019	
2020	
2021	
2022	

1) Project Description: Ongoing replacement of firefighter turnout gear. This is the personal protective equipment firefighters wear including pants, coat and safety harness

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): 10 years unless damaged

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

- 4) Justification: Basic protective gear to allow firefighters to engage in fire fighting activities. This gear is fitted to individual persons and is not interchangeable

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

- 5) How did you determine the project’s cost? Pricing secured from normal vendor

6) Additional Cost Data (Equipment Only)

Purchase Price: 2554.3 per set
 Less Trade-In: Click here to enter text.
 \Net Cost: Click here to enter text.

- 7) Are non-Town revenues available to reduce cost (i.e. grants)? Click here to enter text.

- 8) What will be the effect on your department if this project is delayed?
 Hamper ability to fight fires in remote or wooded locations

- 9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input checked="" type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. This project would serve any and all emergency calls for service in town that require firefighters

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Click here to enter text.

A handwritten signature, possibly reading "A. Z.", is written in black ink. To the right of the signature, the date "11/28/16" is written in the same ink.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Brett J. Salafia, Chairman Board of Fire Commissioners
Enter the Department, and division, if applicable

CONTACT PERSON: Chief Greg Voelker
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Forestry UTV
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Company 1 Firehouse
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	\$20,000
2019	
2020	
2021	
2022	

- 1) **Project Description:** Purchase a second Polaris UTV to finish replacement of aged forestry firefighting vehicles that date to the 1950's. The department lost 2 of the 3 forestry vehicles to age and inability to secure replacement parts over the preceding 3 fiscal years. This vehicle will be in addition to the UTV recently placed into service during the current fiscal year. It will be equipped with a tank and pump system to transport water and personnel to fire scenes in wooded or remote areas. The tank system is removable so the vehicle has utility to transport equipment and personnel or rescue injured persons from remote locations in town.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

- 2) **Useful Life (in years):** 10 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: The loss of the circa 1950's forestry trucks severely limits the ability of the department to fight brush fires and engage in other firefighting activities in remote locations in town. Without this type of equipment, the fire department would be unable to deal with situations in remote or wooded areas

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Pricing secured from state contract bid list for purchase of prior replacement UTV

6) Additional Cost Data (Equipment Only)

Purchase Price: 20,000
 Less Trade-In: [Click here to enter text.](#)
 \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? [Click here to enter text.](#)

8) What will be the effect on your department if this project is delayed?
 Hamper ability to fight fires in remote or wooded locations

9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget

- increase
- decrease
- no change
- amount of change

Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. This project would serve any and all emergency calls for service in town that need this type of apparatus to complete the department mission of protecting life and property

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

[Click here to enter text.](#)



11/28/16

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Brett J. Salafia, Chairman Board of Fire Commissioners
Enter the Department, and division, if applicable

CONTACT PERSON: Chief Greg Voelker
Enter the name of the person who can best answer detailed questions about this project.

TITLE OF REQUEST/PROJECT NAME: Accountability System
Enter the title best describing the project. Be concise, but as descriptive as possible.

LOCATION OF PROJECT: Company 1 Firehouse
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	\$15,000
2019	\$7500
2020	
2021	
2022	

1) **Project Description:** Acquire a computer based accountability system for tracking firefighters on fireground. The system will use RFID fob devices to keep track of individual firefighters on scenes of fires and other large scale incidents. It allows the chief to track individual firefighter locations for safety and security. In subsequent fiscal years, the fob system will be expanded to control access to firehouses and equipment. This will allow for individually tailored security that can be updated via computer.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) **Useful Life (in years):** 10 years

3) **Purpose:**

Scheduled Replacement*

Increased Personnel Efficiency

New/Expanded Service

Replace Obsolete/Unsafe Equipment*

Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

- 4) Justification: Systems like this are becoming the standard for firefighter accountability. This system is expandable to deal with building and equipment security. This accountability provides timed and dated logs for access to secure areas and a record of fire ground operations

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

- 5) How did you determine the project's cost? Inquiry with system vendor

6) Additional Cost Data (Equipment Only)

Purchase Price:	15,000
Less Trade-In:	Click here to enter text.
\Net Cost:	Click here to enter text.

- 7) Are non-Town revenues available to reduce cost (i.e. grants)? Click here to enter text.

- 8) What will be the effect on your department if this project is delayed?
Hamper ability to fight fires in remote or wooded locations

- 9) Please describe the effect of this project on your operating budget. Click here to enter text.

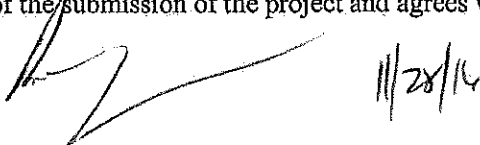
Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input type="checkbox"/> decrease

- no change
- amount of change
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Any fire scene. Also security service for all 3 firehouses

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Click here to enter text.

A handwritten signature in black ink, followed by the date 11/28/14 written in a similar style.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Fuel Island Replacement and/or Relocation**

LOCATION OF PROJECT: Public Works Department
Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	450,000
2019	
2020	
2021	
2022	

- 1) Project Description: Fuel Island replacement and/or replacement. Remediation of previous 10,000 gallon diesel and gasoline tanks located in the ground at the top of the hill at Public Works Department. The Federal Regulations require that all underground tanks be removed and the area remediated before the 30th year since installation. The new tanks must be installed above ground and be constructed with barriers adequate to protect tanks. All necessary dispensing and monitoring devices must also be installed. None of the equipment now in use will be allowable with new installation. Area must be adequate protected from theft, vandalism or extreme weather.
- 2) Useful Life (in years): 30 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of (recycle materials if possible)

4) Justification: Federal mandate, age of equipment.

5) How did you determine the project's cost? Town's consulting engineer preparing cost estimate.

6) Additional Cost Data (Equipment Only)

- Purchase Price: Click here to enter text.
- Less Trade-In: Click here to enter text.
- \Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? no

8) What will be the effect on your department if this project is delayed?
No access to fuel island after deadline.

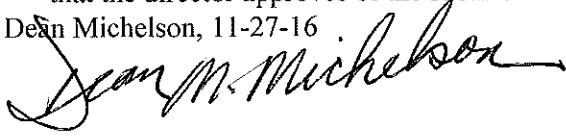
9) Please describe the effect of this project on your operating budget. Click here to enter text.

- | | |
|---|---|
| Personnel Budget | Expense Budget: |
| <input type="checkbox"/> increase | <input type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input type="checkbox"/> decrease |
| <input checked="" type="checkbox"/> no change | <input checked="" type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Public Works Department, One Public Works Drive

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16

A handwritten signature in cursive script that reads "Dean Michelson". The signature is written in black ink and is positioned below the typed name and date.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Brush/Wood chipper**

LOCATION OF PROJECT: Public Works Department

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	55,000
2019	
2020	
2021	
2022	

- 1) Project Description: Brush/wood chipper
- 2) Useful Life (in years): 20-25

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

4) Justification: 2013 was twenty (20) years for present wood/brush chipper. Would keep present machine for backup for disasters or heavy workload situations.

5) How did you determine the project's cost? Vendor estimate; possible state bid, depending upon timing.

6) Additional Cost Data (Equipment Only)

Purchase Price: Click here to enter text.
 Less Trade-In: Click here to enter text.
 Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
 Lengthy and untimely repairs, necessitating rental of chipper (which are hard to obtain in times of bad weather).

9) Please describe the effect of this project on your operating budget. Less repair costs since heaviest work volume would be handled by new machine. Possibly no rental necessary with two machines.

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input checked="" type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Public Works

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Click here to enter text.

Dean M. Michelson
11/28/16

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Road Paver**

LOCATION OF PROJECT: Public Works
)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	160,000
2019	
2020	
2021	
2022	

- 1) Project Description: Replace twenty-two (22) year-old paving machine – parts no longer available. Machine necessary to pave roads and repair sections of roads.
- 2) Useful Life (in years): 15-20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of (possible trade-in, possibly no value)

4) Justification: Present machine cannot be repaired since parts no longer available.

5) How did you determine the project's cost? Vendor's estimate.

6) Additional Cost Data (Equipment Only)

Purchase Price:	160,000
Less Trade-In:	0
\Net Cost:	160,000

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
As above. Will necessitate rental of paver to accomplish projects, many times.

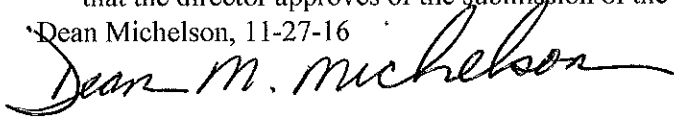
9) Please describe the effect of this project on your operating budget. Increased patching costs due to ineffective road reparations. New machine would be less costly and quicker to repair. Parts readily available.

- | | |
|---|---|
| Personnel Budget | Expense Budget: |
| <input type="checkbox"/> increase | <input type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input type="checkbox"/> decrease |
| <input type="checkbox"/> no change | <input type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Paving/repairing East Hampton's roads.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16

A handwritten signature in cursive script that reads "Dean M. Michelson". The signature is written in black ink and is positioned below the typed name and date.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: Replacement of Plows and Sanders

LOCATION OF PROJECT: Click here to enter text.

Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	15,000
2019	20,000
2020	20,000
2021	20,000
2022	20,000

1) Project Description: Replacement of Plows and Sanders.

Present equipment's life span may be extended with refurbishing, if possible. Road salt is deteriorating working/non-working parts of plowing and sanding mechanisms, since the State has moved to an "all salt" program, and we have recently followed suit.

2) Useful Life (in years): 15-20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of

4) Justification: To extend the life of equipment.

5) How did you determine the project's cost? Estimate

6) Additional Cost Data (Equipment Only)

- Purchase Price: Click here to enter text.
 Less Trade-In: Click here to enter text.
 Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
 More repairs – labor and time involved, both for repairs and searching for parts.

9) Please describe the effect of this project on your operating budget. Department becomes less efficient.

- | | |
|---|--|
| Personnel Budget | Expense Budget: |
| <input type="checkbox"/> increase | <input type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input checked="" type="checkbox"/> decrease |
| <input checked="" type="checkbox"/> no change | <input type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Public Works Department, East Hampton roads.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Click here to enter text.

Jean M. Michelson
11/27/16

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: Care and Upkeep of Roads

LOCATION OF PROJECT: East Hampton roads

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	250,000
2019	275,000
2020	300,000
2021	325,000
2022	350,000

- 1) Project Description: Various locations to be determine by conditions as they warrant.
- 2) Useful Life (in years): 10-15 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) Maintain and repair roads

* Please note how old equipment will be disposed of

4) Justification: Roads have been inadequately maintained in past years and many are in dangerous condition; others need many repairs.

5) How did you determine the project's cost? Engineering Study

6) Additional Cost Data (Equipment Only)

Purchase Price: Click here to enter text.
 Less Trade-In: Click here to enter text.
 Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? State's Town Aid to Roads

8) What will be the effect on your department if this project is delayed?

Roads will continue to deteriorate and promulgate larger capital expenses.

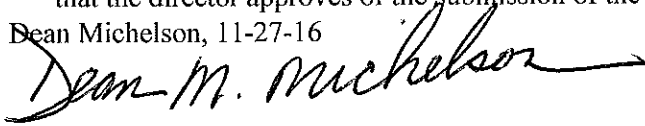
9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input checked="" type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. East Hampton roads

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16

A handwritten signature in cursive script that reads "Dean M. Michelson". The signature is written in black ink and includes a long horizontal flourish at the end.

Town Manager's Use

Approved:	
Not Approved:	
Other:	

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

SUBMITTED BY: Public Works Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Private Road Repair**

LOCATION OF PROJECT: Certain Private Roads in Town

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	10,000
2019	25,000
2020	25,000
2021	25,000
2022	25,000

1) Project Description: Minimal repairs to privately owned roads to restore them to a safe condition.

Give a full, detailed description of the project. The description must contain enough information to allow for a detailed project cost estimate. If costs are estimated to exceed \$250,000 additional information may be required. If the project is construction of a building, specify the following: size; use; type of building; utility type; etc. If it is a street project, specify the following: length; width; whether it is new construction, reconstruction or resurfacing; whether it involves new signals, sewers, and/or sidewalks; etc. Photos and other documentation should also be submitted if they provide relevant information. Any project with insufficient information to develop a cost estimate will not be considered.

2) Useful Life (in years): 8-10 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
 New/Expanded Service Replace Obsolete/Unsafe Equipment*
 Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: Repairs to privately owned roads in order to raise level of safety.

5) How did you determine the project's cost? Estimate for basic reparations

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
 Less Trade-In: [Click here to enter text.](#)
 \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?

We maintain some privately owned roads (since 1900s – for fire protection), at a very low level.

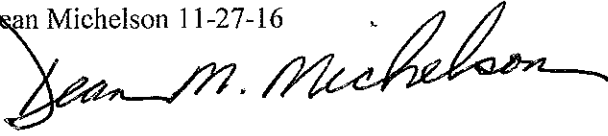
9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input checked="" type="checkbox"/> increase
<input type="checkbox"/> decrease	<input type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Certain private roads in Town.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson 11-27-16

A handwritten signature in cursive script that reads "Dean M. Michelson". The signature is written in black ink and is positioned below the typed name and date.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Sidewalk Repair and Replacement**

LOCATION OF PROJECT: At sidewalk locations throughout town

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	50,000
2019	40,000
2020	40,000
2021	40,000
2022	40,000

- 1) Project Description: Repair and replacement of sidewalks/walkways throughout Town.
- 2) Useful Life (in years): 15 years

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of

4) Justification: Sidewalk repairs are a safety concern both for walkers and snow clearing. Salt applied in winter has deteriorated areas. If these repairs are not performed,

Support the need for this project. Some of the questions you might want to consider below:

- Does the project meet established standards, codes or mandates?
- Does the project address a Town Council policy initiative or Board of Education goal?
- Does it address a health, fire, safety or security concern?
- Does it serve a segment of the community not currently served?
- Does it foster private investment? How much?
- Does it create jobs? How many? What type?
- Does it support economic development (i.e. tourism)?
- Does the project require additional staffing or operational increases (e.g. grant writer)?
- Does the project create any revenue?
- Do grant funds or other opportunities exist to offset costs?
- What will happen if the Town does not undertake this project?

5) How did you determine the project's cost? Town prepared bid package for On-call Sidewalk Repair work.

6) Additional Cost Data (Equipment Only)

Purchase Price: [Click here to enter text.](#)
 Less Trade-In: [Click here to enter text.](#)
 \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?

Further degradation, possible health and safety effects possible due to unsafe areas of sidewalk.

9) Please describe the effect of this project on your operating budget. Click here to enter text.

Personnel Budget

- increase
- decrease
- no change
- amount of change

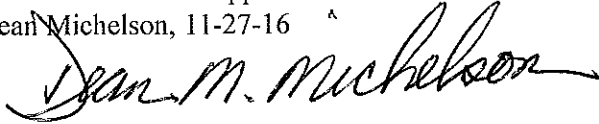
Expense Budget:

- increase
- decrease
- no change
- amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Sidewalk locations in center areas of Town.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16 ^



Town Manager's Use

Approved:	
Not Approved:	
Other:	

Town of East Hampton
FY 2017-2018 Capital Decision Package

SUBMITTED BY: Public Works Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Water Quality - Infrastructure**

LOCATION OF PROJECT: Lake Pocotopaug Watershed Area
 Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	40,000
2019	40,000
2020	40,000
2021	40,000
2022	40,000

- 1) Project Description: Improvement to infrastructure to improve water entering the Lake Pocotopaug area watershed. (Catch basins, drainage improvements)
- 2) Useful Life (in years): 10-15

3) Purpose:

- | | |
|---|---|
| <input type="checkbox"/> Scheduled Replacement* | <input type="checkbox"/> Increased Personnel Efficiency |
| <input checked="" type="checkbox"/> New/Expanded Service | <input type="checkbox"/> Replace Obsolete/Unsafe Equipment* |
| <input type="checkbox"/> Other (please explain) Click here to enter text. | |

* Please note how old equipment will be disposed of

4) Justification: To increase quality of water runoff in Lake watershed area

5) How did you determine the project's cost? Estimate from Dr. Knoeklein's report.

6) Additional Cost Data (Equipment Only)

Purchase Price:	Click here to enter text.
Less Trade-In:	Click here to enter text.
\Net Cost:	Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? Unknown

8) What will be the effect on your department if this project is delayed?
Possibly more cleaning of runoff/material.

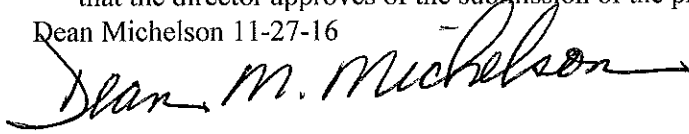
9) Please describe the effect of this project on your operating budget. Increased maintenance costs due to cleaning frequency.

Personnel Budget	Expense Budget:
<input type="checkbox"/> increase	<input type="checkbox"/> increase
<input type="checkbox"/> decrease	<input type="checkbox"/> decrease
<input checked="" type="checkbox"/> no change	<input checked="" type="checkbox"/> no change
<input type="checkbox"/> amount of change	<input type="checkbox"/> amount of change

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Lake Pocotopaug watershed area.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson 11-27-16

A handwritten signature in black ink that reads "Dean M. Michelson". The signature is written in a cursive style with a long horizontal stroke at the end.

Town Manager's Use

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Large (35,000 GVW) Plow/Dump Truck Cab, Chassis and Equipment Package**

LOCATION OF PROJECT: Public Works Department
 Enter the location for the project (i.e. Middle School, Town Hall, Police Department, Fire Co. 1)

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	200,000
2019	
2020	
2021	
2022	

- 1) Project Description: One Large (35 GVW) Plow/Dump Truck Cab, Chassis and Equipment Package. Description of truck follows the truck outlined in the State Bid.
- 2) Useful Life (in years): 15-20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) Click here to enter text.

* Please note how old equipment will be disposed of (may keep as backup)(not sure yet)

4) Justification: More roads expected to be approved (Salmon Run, Chatham Acres –Whispering Woods, Skyline, Sunrise, Highland Terrace, etc.)

5) How did you determine the project’s cost? Past purchase and State bid pricing

6) Additional Cost Data (Equipment Only)

- Purchase Price: Click here to enter text.
- Less Trade-In: Click here to enter text.
- Net Cost: Click here to enter text.

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
Larger overtime costs, longer plow routes, expanded/extended repair costs.

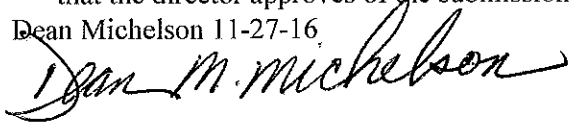
9) Please describe the effect of this project on your operating budget. Stave off large increases in repair costs.

- | | |
|---|---|
| Personnel Budget | Expense Budget: |
| <input type="checkbox"/> increase | <input type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input type="checkbox"/> decrease |
| <input checked="" type="checkbox"/> no change | <input checked="" type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Public Works and the Town of East Hampton

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson 11-27-16

A handwritten signature in cursive script that reads "Dean M. Michelson". The signature is written in black ink and is positioned below the typed name and date.

**Town of East Hampton
FY 2017-2018 Capital Decision Package**

Town Manager's Use

Approved:	
Not Approved:	
Other:	

SUBMITTED BY: Public Works Department

CONTACT PERSON: Dean Michelson

TITLE OF REQUEST/PROJECT NAME: **Vehicle Sinking Fund**

LOCATION OF PROJECT: Public Works Department

This form should be used for capital items of \$7,500 and above.

Fiscal Year	Cost
2018	100,000
2019	125,000
2020	150,000
2021	175,000
2022	200,000

- 1) Project Description: Set aside funding for rolling stock replacements and additions, due to age of present stock and continued growth of road inventory which increases work load all year.
- 2) Useful Life (in years): 15-20

3) Purpose:

- Scheduled Replacement* Increased Personnel Efficiency
- New/Expanded Service Replace Obsolete/Unsafe Equipment*
- Other (please explain) [Click here to enter text.](#)

* Please note how old equipment will be disposed of (trade-in, or keep for spare)

4) Justification: Replacements are sought when vehicle can no longer be repaired due to lack of available parts, or when costs to repair are prohibitive. Additions to fleet are sought as our work load increases; road inventory increased (lengthening plow routes, sweeping, more catch basins to clean). Aging fleet determines replacement in some cases. Safety of machine operators and truck drivers is a concern.

5) How did you determine the project's cost? State bid/CRCOG bid, etc. prices are used.

6) Additional Cost Data (Equipment Only) Each vehicle is handled individually.

- Purchase Price: [Click here to enter text.](#)
- Less Trade-In: [Click here to enter text.](#)
- \Net Cost: [Click here to enter text.](#)

7) Are non-Town revenues available to reduce cost (i.e. grants)? No

8) What will be the effect on your department if this project is delayed?
 Repair costs and lost work time would increase as fleet ages.

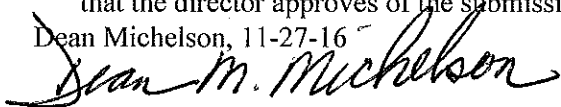
9) Please describe the effect of this project on your operating budget. [Click here to enter text.](#)

- | | |
|---|--|
| Personnel Budget | Expense Budget: |
| <input type="checkbox"/> increase | <input type="checkbox"/> increase |
| <input type="checkbox"/> decrease | <input checked="" type="checkbox"/> decrease |
| <input checked="" type="checkbox"/> no change | <input type="checkbox"/> no change |
| <input type="checkbox"/> amount of change | <input type="checkbox"/> amount of change |

10) PROJECT LOCATION AND SERVICE AREA: Give a brief description of the community impact the project will have as well as the area it will serve. Town of East Hampton will be better served by more efficient vehicles, and when a truck does down for repairs in winter, there is no spare.

11) SIGNATURE: The Department Director must sign the bottom of the form and date it. The signature indicates that the director approves of the submission of the project and agrees with the information provided.

Dean Michelson, 11-27-16

A handwritten signature in cursive script that reads "Dean M. Michelson". The signature is written in black ink and is positioned below the typed name and date.

Heating – Air Conditioning – Ventilation
Improvement Design Narrative

For

Center School Elementary School

Summit Street
East Hampton, CT

November 28, 2016



Prepared by:

Consulting Engineering Services, Inc.

811 Middle Street, Middletown, Connecticut, 06457

CES PN 2016352.00

Overview:

We were retained by East Hampton Public Schools to provide a study to improve the heating system at Center School located on Summit Street. The study will also include scope for air conditioning and ventilation. The heating scope is the primary focus for this report. The building is approximately 43,000 square feet. The original building is three stories and was constructed in 1939. Renovations and additions were constructed in 1963 and 1993 and consist of a two story classroom wing, Main Office Area, Library and Gymnasium. The cafeteria and kitchen is located in the two story classroom wing.

Existing Heating System:

The existing heating system consists of a steam boiler plant and hot water boiler plant. The steam system serves both the 2 story and 3 story classroom wings. The hot water boiler plant serves the Library, Main Office and Gymnasium.

Other than the recently replaced Riello burner, the entire steam heating system including the steam boiler, piping distribution and steam radiators are operating beyond its useful life. Steam condensate is a highly corrosive fluid which destroys boilers and piping systems from the inside. It's my understanding sections of the steam boiler have already been replaced. This will continue to occur. In addition to the steam boiler system, leaks in the piping distribution and radiators can also be expected due to the corrosive nature of the steam condensate piping system. The steam piping and boiler is at risk of significant leak failures.

The recently installed hot water boiler plant consists of a condensing boiler with a primary/secondary piping distribution system. The hot water plant appears to be operating adequately. The condensing boiler will generate hot water more efficiently as compared to the standard boilers.

Existing Air Conditioning and Ventilation System

Presently, there is limited air conditioning in the building. The only spaces with air conditioning are the Main Office area and Library. The existing air conditioning units are operating at or near the end of their useful life and should be replaced.

Based on the International Mechanical Code, Connecticut code mandates that ventilation air shall be provided for each occupied space. Ventilation air could be provided either through mechanical air systems or natural ventilation through operable windows.

The Main Office and Library air handling units do not have provisions for ventilation and will need to be reconfigured to include ventilation air which would require reconfiguration of the ductwork distribution system.

The mechanical unit for the Gymnasium has provisions for ventilation.

The remaining building utilizes natural ventilation through operable windows. We do not recommend natural ventilation from operable windows even though this is allowed by Connecticut code since it is not likely or recommended to open windows when buildings are in either heating or cooling mode.

Propose Heating System:

The existing hot water boiler and distribution serving the Library and Main Office should remain in place since the system is operating adequately with a high efficient output.

Since the entire steam system is experiencing failures and operating beyond its useful life, the steam boiler should be replaced with a new hot water condensing boiler plant. We recommend utilizing hot water instead of steam since hot water requires less maintenance and operates at higher efficiencies. The Riello burner should be re-located to another facility with a gas driven burner at an equivalent firing rate capacity.

The primary reason fluid in a steam system is corrosive is due to the presents of an air and water mixture in the boiler and piping system. Air and water combination leads to rust and corrosion. Water within a hot water boiler plant and piping distribution system will not be exposed to air which eliminates failures and maintenance issues consistent with a steam system. A hot water condensing boiler plant will reduce fuel consumption by 10 to 15% as compared to a steam boiler system.

As indicated, the steam piping distribution system and steam fin tube radiators should also be replaced with a hot water piping distribution system and perimeter hot fin tube radiators.

Listed below is a summary of the hot water heating system.

- Boilers: (2) Condensing boilers each rated for 2,000,000 btuh input. Each boiler sized for approximately 100% capacity for complete redundancy.
- Pumps: (2) pumps each rated for 10 HP. Each pump sized for approximately 100% capacity for complete redundancy. Pump arrangement should be primary variable.
- Existing hot water boiler and distribution serving the Library and Main Office should remain.
- 1939 Original Building:
 - Steam fin tube radiators should be replaced with hot water fin tube radiation which shall be 24 inch high perimeter fin tube radiation. Heating element shall be $\frac{3}{4}$ inch copper pipe with 4-1/2 x 4-1/2 aluminum fin.
 - Steam and steam condensate shall be replaced with hot water piping.
- Two Story Classroom Wing:
 - Steam fin tube radiators should be replaced with hot water fin tube radiation which shall be 24 inch high perimeter fin tube radiation. Heating element shall be $\frac{3}{4}$ inch copper pipe with 4-1/2 x 4-1/2 aluminum fin.
 - Steam and steam condensate shall be replaced with hot water piping.
- Replace steam cabinet unit heaters in stairwells, entrances and vestibules with hot water cabinet unit heaters.

1939 Original Building Propose Air Conditioning and Ventilation System:

Traditional air conditioning and ventilation systems are based on a centralized air handling system with centralized ductwork distribution. The floor to floor elevations in the original building cannot support a centralized cooling ductwork system. If a central ducted cooling and ventilation system installation were attempted, ceiling elevations would need to be lowered by at least 12 inches and ductwork cross section areas will need to be reduced which often leads to acoustical issues. For this part of the building we recommend a variable refrigerant flow (VRF) system with a dedicated outdoor air (DOA) system.

The VRF system will provide cooling. Supplemental heating is inherently available with a VRF system. Although the primary heating source would be a hot water fin tube radiation as described in the proposed heating section of this report. The DOA system will provide conditioned room neutral ventilation air to each space.

The VRF system transfers energy with refrigerant pipe instead of ductwork. Refrigerant pipe takes up less space and will fit above the ceiling without lowering the ceiling. VRF and DOA systems are approximately 15% to 30% more efficient as compared to traditional centralized ducted cooling systems. VRF and DOA system are common with CT High Performance School Projects.

VRF System Scope:

The VRF system serving the Classrooms, Offices and Conference Rooms in the 1939 Original Building shall consist of indoor fan coil units and outdoor aircooled condensing units. The indoor fan coil units will be the cassette type unit mounted on the ceiling similar to a light fixture. The aircooled condensing units will be located on the roof. The outdoor units generate cooling. The indoor units deliver the heating and cooling to the occupants. Refrigerant pipe distribution will be used to convey heating and cooling energy between the indoor fan coil units and outdoor condensing units. Within the refrigerant pipe distribution, refrigerant distribution boxes with solenoid valves will be used to distribute refrigerant flow to each zone. VRF fan will modulate refrigerant flow as required to maintain the space temperature set-point. Listed below is a description of the VRF system equipment capacity:

- VRF system by Daikin or Mitsubishi.
- One (2) 1-1/2 ton cassette fan coil unit per classroom
- One (1) 1 ton cassette fan coil unit per office.
- 35 ton cooling capacity for the VRF condensing units system.

DOA System Scope:

The DOA system serving the Classrooms, Offices and Conference Rooms in the 1939 Original Building shall consist of a roof mounted air handling system and ductwork distribution system. The roof mounted DOA unit shall be utilized to provide 100% preconditioned outside air to the occupied spaces via a ductwork distribution system. The DOA system shall consist of a plate or wheel heat exchanger, DX package cooling, hot gas reheat, indirect gas fired furnace, supply fan and relief fan. Ductwork distribution associated with outdoor air ventilation is approximately 60% smaller than traditional heating and cooling ductwork distribution systems since the DOA ductwork distribution transfers conditioned outside air only. The airflow is not used to heat or cool the space. Listed below is a description of the DOA system equipment capacity:

- DOA units shall be by Daikin or Aeon.
- Estimate (1) 5,000 CFM units above the 1939 academic wing.

Two Story Classroom Wing, Main Office, Library and Gym Propose Air Conditioning and Ventilation System

This part of the building has no air conditioning and utilizes natural ventilation. We recommend traditional centralized cooling and ventilation air system for these spaces since this type of system is less expensive, will fit within the building without compromising ceiling elevations and meets Connecticut's energy code criteria.

Two Story Classroom Wing Air Conditioning and Ventilation

For this area we recommend a variable air volume package roof top cooling unit with gas heat. The roof top unit would be the cooling and ventilation. The primary heating source would hot water perimeter fin tub radiation. The roof top unit (RTU) would be utilized to provide cooling and ventilation to each space via a ductwork distribution system. The RTU system shall consist of a DX package cooling, hot gas reheat, DX reversing valve, supply fan and return fan. The ductwork distribution will extend from the roof top unit to each space. Within each temperature control zone, a variable air volume (VAV) box will be mounted within the ductwork distribution. When spaces require cooling, the VAV box will modulate open. Even though this system requires large ductwork, there is adequate space above the ceiling to fit the ductwork distribution. We recommend a dedicated RTU to serve the 2nd floor classroom wing and a dedicated RTU to serve the 1st floor classroom wing and cafeteria. Listed below is a description of the VAV system equipment:

- RTU units shall be by Daikin or Aeon.
- RTU serving 2nd floor: (1) 6,000 CFM units above the two story academic wing.
- RTU serving 1st floor: (1) 7,000 CFM units above the two story academic wing.
- Typical classroom VAV: 10" Box size (1200 CFM)
- Cafeteria VAV: (3) 10" Box size (1200 CFM)

Office Air Conditioning and Ventilation

For the Office air conditioning and ventilation system, we recommend replacing the existing air handling unit (AHU) and condensing unit (CU) with new units since the existing cooling capacity does not include ventilation loads. Also, the equipment should be replaced since it is operating beyond its useful life which is typically 15 to 20 years for this type of equipment. Ductwork will need to be modified to include ventilation air. The AHU system shall consist of a DX cooling. The existing hot water boiler system recently installed this summer would remain as the heating source for this area. The unit should also incorporate demand control ventilation which will modulate the amount of outside air to the space based on occupancy and CO₂. Listed below is a description of the constant volume system equipment:

- AHU/CU units shall be by Daikin or Aeon.
- AHU: (1) 1,200 CFM units
- CU: 3 Tons

Library Air Conditioning and Ventilation

For the Library air conditioning and ventilation system, we recommend replacing the existing air handling unit (AHU) and condensing unit (CU) with new units since the existing cooling capacity does not include ventilation loads. Also, the equipment should be replaced since it is operating beyond its useful life which is typically 15 to 20 years for this type of equipment. Ductwork will need to be modified to include ventilation air. The AHU system shall consist of a DX cooling. The existing hot water boiler system recently installed this summer would remain as the heating source for this area. Listed below is a description of the constant volume system:

- AHU/CU units shall be by Daikin or Aeon.
- AHU: (1) 1,600 CFM units
- CU: 4 Tons

Gymnasium HVAC

For the Gymnasium HVAC system, we recommend a single zone constant volume rooftop air handling unit which will provide both heating and cooling. The RTU system shall consist of a DX package cooling, hot gas reheat, indirect gas fired furnace, supply fan and return fan. The unit should also incorporate demand control ventilation which will modulate the amount of outside air to the space based on occupancy and CO₂. Listed below is a description of the constant volume system equipment:

- RTU units shall be by Daikin or Aeon.
- RTU serving Gym: (2) 3,000 CFM units above the single story office area.

Temperature Controls Scope

We recommend a Building Management System (BMS) which is a computer-based control system installed to control and monitor the building mechanical system. The existing system is a pneumatic control system with limited control and monitoring capacity. BMS controls would improve space temperature comfort, improve equipment operating efficiencies, provide effective monitoring and targeting of energy consumption and provide effective response to HVAC-related complaints. Listed below is a description of the BMS system

- BMS shall be Alerton or Invensys- Schneider Electric's Energy Management Control System.
- The system shall include a personal computer with graphics based display, color printer, modem and capabilities for alarming off-site.
- The BMS shall provide temperature control for all HVAC systems.
- The system shall be programmed for occupied/unoccupied cycles for the air handling equipment, with an override feature for spaces that would be utilized after-hours.
- The system shall monitor occupancy sensing devices to control the amount of outside air being brought in to each classroom to assist in energy conservation.
- The BMS shall be accessible from any Web browser, with proper authorization.

Main Electrical Service and Distribution

The existing 1200A, 208/120V 3 phase electrical service is adequate to support the addition of Mechanical cooling throughout the school. An analysis of current electrical bills of the school indicates that the school has a 12month peak electrical load of 270A. Additional electrical gear will have to be installed to accommodate the additional mechanical equipment. The existing main switchboard appears to be full and cannot accommodate additional circuit breakers. We suggest an additional switchboard is provided with a bus tap from the existing switchboard to accommodate the mechanical loads. We anticipate an additional panelboard will be needed to provide power to smaller HVAC loads throughout the building.

Materials and Methods:

Include the following basic materials and methods of construction:

- All ductwork and accessories shall meet SMACNA standards. After installation of duct is complete third party shall clean all ductwork.
- Provide all HVAC equipment with extra set of filters.
- Seismic restraints shall be designed and installed as required per State of Connecticut Building Code and Fire Safety Code which requires the seal of a licensed professional engineer. Abovementioned professional engineer will be required to verify installation is correct and complete per seismic code. This includes piping, ductwork, equipment, and equipment bases.
- Provide glass fiber insulation for all hydronic piping and ductwork. Insulation shall be installed to meet the Energy Code.
- Provide firestopping around mechanical penetrations in accordance with fire stopping requirements. System shall be capable of maintaining against flame and gases. System shall be UL listed and comply with ASTM E814.
- Provide mechanical identification for mechanical systems. Identification shall comply with ANSI A13.1.
- All pipe connections shall be installed to allow for freedom of movement of the piping during expansion and contraction without springing. Swing joints, expansion loops and expansion joints with proper anchors and guides shall be provided where shown.
- Provide vibration isolation for hydronic piping, ductwork, and equipment.
- Hydronic piping 2 1/2"φ and under shall be Type L copper. Piping 3" and over shall be ASTM A 53; Schedule 10 black steel pipe with welded, flanged or grooved joints.
- All equipment served by hydronic piping shall have isolation valves on the supply and return lines. Isolation valves shall also be provided at branch take-offs.

Miscellaneous HVAC Scope

As part of the project scope, we investigated the facility heating, cooling and ventilation system. During our field visit, we came across other deficiencies associated with the mechanical system as indicated below:

Kitchen:

Kitchen exhaust hoods (Dishwasher & Grease) shall be installed per NFPA 96 with carbon steel ductwork and up-blast exhaust fans with ventilated curbs. Dishwasher exhaust hoods shall be installed with stainless steel ductwork and up-blast exhaust fans with ventilated curbs. A make-up air unit mounted on the roof will provide heated outside air to the grease hood exhaust and dishwasher exhaust.

- Grease hood exhaust fan shall be by Loren Cook or approved equal. Estimate grease hood exhaust is 5,000 CFM.
- Dishwasher hood exhaust fan shall be by Loren Cook or approved equal. Estimate grease hood exhaust is 1,200 CFM.
- The make-up air unit shall be by Daikin or approved equal. Estimate make-up air flow is 6,200 CFM.

Tel/Data:

Data closets will be served by ductless split units, by LG or approved equal.

- Estimate one(1) 1.5 ton unit for each IDF room.
- Estimate one (1) 3 ton unit for MDF rooms.

General Exhaust:

All restrooms shall be provided with new exhaust fans.

Cost Estimate

Based on the forgoing, the following is representative of the project budget estimate of probable construction costs for the major scope. These costs are inclusive of the “hard” construction activities and do not include “soft” costs such as fees and contingencies. In addition to soft cost, the cost estimate does not include asbestos abatement, ceiling removal and ceiling replacement, wall demolition, HVAC demolition, new shaft wall construction, structural HVAC support, Miscellaneous HVAC section and re-roofing for roof top equipment.

Heating System Cost Estimate: The cost estimate for the heating system approximately \$775,000 with a range of \$675,000 to \$875,000. Note: this does not include the air conditioning and ventilation cost estimate and items listed in the miscellaneous section. Scope of work listed below:

- (2) Condensing boilers each rated for 2,000,000 btuh input.
- (2) Pumps each rated for 10 HP.
- Electrical upgrade for the new boilers and pumps
- Replace Steam and steam condensate piping distribution with hot water supply and hot water return piping system.
- Replace steam fin tube radiation with 24 inch high perimeter fin tube radiation.
- Replace steam cabinet unit heaters in stairwells, entrances and vestibules with hot water cabinet unit heaters.
- Boiler plant BMS controls.

Air Conditioning and Ventilation System Cost Estimate: The cost estimate for the air conditioning and ventilation is \$1,725,000 with a range of \$1,375,000 to \$2,075,000. Note: this does not include the heating cost estimate and items listed in the miscellaneous section. Scope of work listed below:

- 1939 Academic Wing:
 - 35 ton VRF system serving
 - 5,000 CFM DOA unit
 - DOA Ductwork Distribution
 - BMS controls
 - Electrical Power
- Office
 - 1,200 CFM AHU
 - 3 ton condensing unit
 - Ductwork modification associated with ventilation air
 - BMS controls
 - Electrical Power

- Library
 - 1,600 CFM AHU
 - 4 ton condensing unit
 - Ductwork modification associated with ventilation air
 - BMS controls
 - Electrical Power

- Gymnasium
 - (2) 3,000 CFM units
 - BMS controls
 - Electrical Power

- Two Story Classroom Wing
 - RTU serving 2nd floor: (1) 6,000 CFM
 - RTU serving 1st floor: (1) 7,000 CFM
 - New ductwork distribution system with VAV boxes.
 - BMS Controls
 - Electrical distribution

End of Report.

Heating & Cooling Project Considerations/Conceptual Cost Projections

Center School

Boiler Replacement (convert to hot water heat):

- Replace steam boiler with two (2) condensing style boilers, 2 pumps
- Boilers/labor - \$600,000 to \$800,000
- Associated electrical - \$75,000
- Architectural - \$25,000
- Demolition -\$50,000
- Construction - \$50,000
- Abatement -\$75,000
- Contingency - \$40,000
- Conceptual total (values need to be vetted) **\$890,000 to \$1,085,000 target range**

HVAC

- Heating & air conditioning (units & labor) \$1,500,000 to \$2,100,000
- Electrical \$400,000 to \$700,000
- Structural \$100,000
- Architectural \$25,000
- Plumbing \$150,000
- Construction & ceiling tile replacement \$75,000
- Abatement \$75,000
- Conceptual total (values need to be vetted) **\$2,325,000 to \$3,225,000 target range**

Timing (Conceptual schedule)

- Both projects require summer time line to complete
- Design would need to be completed 4 months prior
- Submittals would need to be completed and approved prior to summer construction
- Materials would need to be staged ahead of time and be immediately available at start of project

Potential Financial Incentives & State Funding

- Connecticut Clean Energy Fund/Eversource - potentially up to 25% -50% of boiler cost
- State of Connecticut Department of Administrative Services cost sharing – Energy efficiency & Air quality project (low priority project may not be funded)