



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 22-15-01 Dept Name FEAS Contact Person/Tel # 978-649-7671
 Prepared by T. MADDEN Signature T. Madden Date 1/29/14
 Fiscal Year Needed 15 Project Name REPLACE STATION 2

Expected Life of Item 50 (Yrs) Is this a replacement Item YES Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 2,500,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? _____ If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? YES
 If yes, has this been completed? NO (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

BUILDING EXCEEDS REPAIRS TO VALUE
NON COMPLIANT ADA

Source of estimated cost (include copies of any backup information as appropriate):

FEASIBILITY STUDY

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

REDUCE ONGOING REPAIRS

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

BUILDING IS 74 YEARS OLD



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name STATION 2 Tracking Number 22-15-01

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	NO
Months Use per Year	12
Number of Weeks Use per Year	52
Average Days per Week Used	7
Average Hours per Day Used	24
Estimated Useful Life (in Years)	50



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 22 - 16 - 01 Dept Name FIVE Contact Person/Tel # 649-7671

Prepared by T. MADDEN Signature T. Madden Date 1/29/14

Fiscal Year Needed 16 Project Name SERVICE BRUSH TRUCK

Expected Life of Item 8 (Yrs) Is this a replacement Item YES Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 35,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? NO If yes, submit a copy _____

Is a Design, Study, Bid Specification, or Consultant required for this project? _____
If yes, has this been completed? _____ (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? _____

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

REPLACE PICK UP USED FOR
BRUSH FLIES PLOWING AND DAILY
SERVICE

Source of estimated cost (include copies of any backup information as appropriate):
CURRENT COST

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):
REDUCE MAINTAINANCE COST

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced
AGE 2001 80K MILEAGE



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
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Reference: Project Name Backup Replacement Tracking Number 22-16-01

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u>NO</u>
Months Use per Year	<u>12</u>
Number of Weeks Use per Year	<u>52</u>
Average Days per Week Used	<u>7</u>
Average Hours per Day Used	<u>2</u>
Estimated Useful Life (in Years)	<u>8</u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 22-19-03 Dept Name FIRE Contact Person/Tel # 649-7671

Prepared by T. MADDEN Signature T. Madden Date 1/29/14

Fiscal Year Needed 19 Project Name REPLACE ENG 3

Expected Life of Item 20 (Yrs) Is this a replacement Item YES Are Add'l Pages Attached

Total Current Estimated Cost \$ 450,000 Non-General Fund source:

Was a Grant applied for in connection with this project? NO If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? NO
If yes, has this been completed? YES NO (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? YES

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

REPLACE 1999 ENGINE
MAINTAIN CURRENT ISO RATING

Source of estimated cost (include copies of any backup information as appropriate):

CURRENT BIDS Plus INFLATION

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

REDUCE COSTS DUE TO REPAIRS

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

ENG 3 FAIR CONDITION 53,000 MILES



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
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Reference: Project Name ENG 3 REPLACEMENT Tracking Number 22-19-03

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u>NO</u>
Months Use per Year	<u>12</u>
Number of Weeks Use per Year	<u>52</u>
Average Days per Week Used	<u>7</u>
Average Hours per Day Used	<u>2</u>
Estimated Useful Life (in Years)	<u>20</u>



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
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Part I

Tracking # 425 - 15 - 01 Dept Name Highway Contact Person/Tel # 649-2310
 Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 15 Project Name Replace 1999 6 wheel dump truck w/plow and sander (T12)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 160,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
 If yes, has this been completed? No (If yes, submit details and copies of documents
 including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is in danger of no longer passing state inspection.

Source of estimated cost (include copies of any backup information as appropriate):

Minuteman Trucking and Taylor and Lloyd Truck Sales

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 1999 Chevy 6 wheel dump truck with sander. It has become difficult to locate parts for vehicle.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
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Reference: Project Name Replace dump truck w/plow and sander (T12) Tracking Number 425-15-01

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	_____ No _____
Months Use per Year	_____ 12 _____
Number of Weeks Use per Year	_____ 52 _____
Average Days per Week Used	_____ 8 _____
Average Hours per Day Used	_____ 10 _____
Estimated Useful Life (in Years)	_____ 10 _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
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Part I

Tracking # 425 - 15 - 02 Dept Name Highway Contact Person/Tel # 649-2310
Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 15 Project Name Replace 1999 6 wheel dump truck w/plow and sander (T14)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 160,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is in danger of no longer cost effective to operate and maintain.

Source of estimated cost (include copies of any backup information as appropriate):

Minuteman Trucking and Lloyd and Taylor Truck Sales

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 1999 Chevy 6 wheel dump truck with sander. It has become difficult to locate parts for vehicle.



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Reference: Project Name Replace dump truck w/plow and sander (T14) Tracking Number 425-15-02

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u>No</u>
Months Use per Year	<u>12</u>
Number of Weeks Use per Year	<u>52</u>
Average Days per Week Used	<u>8</u>
Average Hours per Day Used	<u>10</u>
Estimated Useful Life (in Years)	<u>10</u>



Town of Tyngsborough
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Part I

Tracking # 425 - 15 - 03 Dept Name Highway Contact Person/Tel # 649-2310
 Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 15 Project Name Replace 2005 1 ton diesel dump truck w/plow (T11)

Expected Life of Item 10 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 60,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
 If yes, has this been completed? No (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:
This vehicle is no longer cost effective to operate and maintain.

Source of estimated cost (include copies of any backup information as appropriate):
Liberty Chevrolet

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
We currently plow all town roads along with hired subcontractors. If any unit is out of service it would be necessary to hire additional subcontractors to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced
Replacing a 2005 diesel dump truck with plow.



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Reference: Project Name Replace dump truck w/plow and sander (T11) Tracking Number 425-15-03

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	No
Months Use per Year	12
Number of Weeks Use per Year	52
Average Days per Week Used	8
Average Hours per Day Used	10
Estimated Useful Life (in Years)	10



Town of Tyngsborough
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Part I

Tracking # 425 - 15 - 04 Dept Name Highway Contact Person/Tel # 649-2310
 Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 15 Project Name Replace Bucket Truck

Expected Life of Item 10 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 20,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
 If yes, has this been completed? No (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle does not operate properly and is no longer cost effective to operate and maintain.

Source of estimated cost (include copies of any backup information as appropriate):

CUES

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):
We are often called upon to remove tree branches near public roadways for public safety reasons and if the bucket truck is not functioning properly we would need to rent a similar vehicle to complete the necessary requested work.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing Bucket Truck



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
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Reference: Project Name Replace Bucket Truck Tracking Number 425-15-04

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- (X) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 8 </u>
Average Hours per Day Used	<u> 10 </u>
Estimated Useful Life (in Years)	<u> </u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 425 - 16 - 01 Dept Name Highway Contact Person/Tel # 649-2310
Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 15 Project Name Replace 1999 6 wheel dump truck w/plow and sander (T3)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 160,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is in danger of no longer passing state inspection.

Source of estimated cost (include copies of any backup information as appropriate):

Minuteman Trucking and Taylor and Lloyd Truck Sales

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 2002 6 wheel dump truck with plow and sander



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Reference: Project Name Replace dump truck w/plow and sander (T3
) Tracking Number 425-16-01

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	_____ No _____
Months Use per Year	_____ 12 _____
Number of Weeks Use per Year	_____ 52 _____
Average Days per Week Used	_____ 8 _____
Average Hours per Day Used	_____ 10 _____
Estimated Useful Life (in Years)	_____ 10 _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 425 - 16 - 02 Dept Name Highway Contact Person/Tel # 649-2310
Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 16 Project Name Replace 1999 6 wheel dump truck w/plow and sander (T4)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 160,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is in danger of no longer passing state inspection.

Source of estimated cost (include copies of any backup information as appropriate):

Minuteman Trucking and Taylor and Lloyd Truck Sales

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 2002 6 wheel dump truck with plow and sander



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Reference: Project Name Replace dump truck w/plow and sander (T4) Tracking Number 425-16-02

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement**
- Present Equipment Obsolete**
- Replace Worn Out Equipment**
- Reduce Personnel Time (ie, Payroll Savings)**
- Expanded Service**
- New Operation**
- Increased Safety**
- Improve Procedures, Records, Etc**
- Regulatory Compliance**

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 8 </u>
Average Hours per Day Used	<u> 10 </u>
Estimated Useful Life (in Years)	<u> 10 </u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 425 - 16 - 03 Dept Name Highway Contact Person/Tel # 649-2310
Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 16 Project Name Replace 1997 ¼ ton truck with plow

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 45,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is in danger of no longer passing state inspection.

Source of estimated cost (include copies of any backup information as appropriate):

Liberty Chevrolet

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 1997 ¼ ton truck with plow



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Reference: Project Name Replace ¾ ton truck w/plow Tracking Number 425-16-03

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- (X) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 8 </u>
Average Hours per Day Used	<u> 10 </u>
Estimated Useful Life (in Years)	<u> 10 </u>



Town of Tyngsborough
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Part I

Tracking # 425 - 17 - 01 Dept Name Highway Contact Person/Tel # 649-2310
 Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 17 Project Name Replace 2002 6 wheel dump truck w/plow and sander (T15)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 160,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
 If yes, has this been completed? No (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is in danger of no longer passing state inspection.

Source of estimated cost (include copies of any backup information as appropriate):

Minuteman Trucking and Taylor and Lloyd Truck Sales

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 2002 6 wheel dump truck with plow and sander.



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Reference: Project Name Replace dump truck w/plow and sander (T15) Tracking Number 425-17-01

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- (X) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 8 </u>
Average Hours per Day Used	<u> 10 </u>
Estimated Useful Life (in Years)	<u> 10 </u>



**Town of Tyngsborough
Capital Project Item Justification Request
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FY 2015 to FY 2019**

Part I

Tracking # 425 - 17 - 02 Dept Name Highway Contact Person/Tel # 649-2310
Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 17 Project Name Replace 2002 6 wheel dump truck w/plow and sander (T17)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 160,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is used on a regular basis and is presently in poor condition. Another 3 years of use will make this vehicle nearly useless.

Source of estimated cost (include copies of any backup information as appropriate):

Minuteman Trucking and Taylor and Lloyd Truck Sales

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc. and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 2002 6 wheel dump truck with plow and sander.



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Reference: Project Name Replace dump truck w/plow and sander (T17) Tracking Number 425-17-02

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	_____ No _____
Months Use per Year	_____ 12 _____
Number of Weeks Use per Year	_____ 52 _____
Average Days per Week Used	_____ 8 _____
Average Hours per Day Used	_____ 10 _____
Estimated Useful Life (in Years)	_____ 10 _____



Town of Tyngsborough
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Part I

Tracking # 425 - 17 - 03 Dept Name Highway Contact Person/Tel # 649-2310
 Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 17 Project Name Replace 1995 ¾ ton truck with plow (T5)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 45,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
 If yes, has this been completed? No (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is in danger of no longer passing state inspection.

Source of estimated cost (include copies of any backup information as appropriate):

Liberty Chevrolet

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 1997 ¾ ton truck with plow.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Replace dump truck w/plow and sander (T5) Tracking Number 425-17-03

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 8 </u>
Average Hours per Day Used	<u> 10 </u>
Estimated Useful Life (in Years)	<u> 10 </u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2014 to FY 2018**

Part I

Tracking # 425-17-04 Dept. Name Highway Contact Person/Tel # 978-649-2310

Prepared by Jim Hustins Signature _____ Date 01/30/2014

Fiscal Year Needed 17 Project Name Replacement of the Fuel Control System and the Fuel
Dispensers/Pumps at the Highway Department Fueling Stations

Expected Life of Item 20 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached Yes

Total Current Estimated Cost \$30,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? _____ (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? Not at this time, but if unaddressed could become a
regulatory compliance requirement.

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of
significance and reason for timing:

The Fuel Control System has failed multiple in the past 5 years; the first time was a result of water entering
the underground communication and electrical conduits & the second time was due to a circuit board and chip
failure.

Source of estimated cost (include copies of any backup information as appropriate):

Quotes. Two quotes attached; 1. Fuel Control System and 2. Fuel Dispensers/Pumps

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):

Not funded.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of
equipment to be replaced

Replacement of the Fuel Control System, installed in roughly 1997 and the replacement of the fuel
dispensers/pumps, both diesel & unleaded gasoline. The totalizer (also referred to as the mileage) on the
dispensers/pumps are 5974475 (Diesel) & 5285681(Gas), respectively. The
fuel dispensers/pumps are estimated to have been installed more than 25 years ago.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2014 to FY 2018

Reference: Project Name Fuel Dispensers Tracking Number 425-17-04

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u>No</u>
Months Use per Year	<u>12</u>
Number of Weeks Use per Year	<u>52</u>
Average Days per Week Used	<u>7</u>
Average Hours per Day Used	<u>4 (educated estimation)</u>
Estimated Useful Life (in Years)	<u>20</u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 425 - 18 - 01 Dept Name Highway Contact Person/Tel # 649-2310

Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 18 Project Name Replace 2007 6 wheel dump truck w/plow and sander (T8)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 160,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is used on a regular basis and is presently in poor condition. Another 4 years of use will make this vehicle nearly useless and difficult to operate and maintain.

Source of estimated cost (include copies of any backup information as appropriate):

Minuteman Trucking and Taylor and Lloyd Truck Sales

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

We currently do all the sanding with town equipment only. If any unit is out of service it may be necessary to rent or hire subcontract service to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 2007 6 wheel dump truck with plow and sander.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Replace dump truck w/plow and sander (T8) Tracking Number 425-18-01

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	_____ No _____
Months Use per Year	_____ 12 _____
Number of Weeks Use per Year	_____ 52 _____
Average Days per Week Used	_____ 8 _____
Average Hours per Day Used	_____ 10 _____
Estimated Useful Life (in Years)	_____ 10 _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 425 - 18 - 02 Dept Name Highway Contact Person/Tel # 649-2310
Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 18 Project Name Replace 2009 1 ton diesel dump truck w/plow (T6)

Expected Life of Item 10 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 60,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No

If yes, has this been completed? No (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is will not be cost effective to operate and maintain after an additional 4 years of service.

Source of estimated cost (include copies of any backup information as appropriate):

Liberty Chevrolet

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

We currently plow all town roads along with hired subcontractors. If any unit is out of service it would be necessary to hire additional subcontractors to cover equipment needs.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 2009 1 ton diesel dump truck with plow.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Replace 1 ton diesel dump truck w/plow (T6) Tracking Number 425-18-02

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 8 </u>
Average Hours per Day Used	<u> 10 </u>
Estimated Useful Life (in Years)	<u> 10 </u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 425 - 19 - 01 Dept Name Highway Contact Person/Tel # 649-2310
Prepared by James Hustins Signature _____ Date 1/30/14

Fiscal Year Needed 19 Project Name Replace 2009 Utility truck w/plow (T18)

Expected Life of Item 10 (Yrs) Is this a replacement Item yes Are Add'l Pages Attached _____

Total Current Estimated Cost \$ 60,000.00 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Yes

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

This vehicle is used on a daily basis and it is anticipated will no longer be functional after 5 additional years of service.

Source of estimated cost (include copies of any backup information as appropriate):

Liberty Chevrolet

Detailed explanation of impact on operating budget (Include impact if funded, le savings etc, and also if NOT funded):

We currently use this truck on a daily basis for moving and hauling items as requested by various town departments. This includes voting booths, safety cones, storage boxes, etc. If this vehicle is not available a rental replacement would be needed.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replacing a 2009 Utility truck with plow



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Replace Utility Truck w/ plow (T18) Tracking Number 425-19-01

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- (X) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

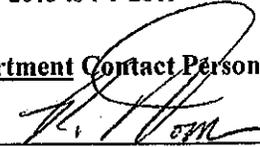
Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 8 </u>
Average Hours per Day Used	<u> 10 </u>
Estimated Useful Life (in Years)	<u> 10 </u>



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
 FY 2015 to FY 2019

Part I

Tracking # 210-15-01 Dept Name Police Department Contact Person/Tel # 978-649-7504

Prepared by; Chief Richard D. Howe Signature  Date 1/30/14

Fiscal Year Needed 2015 Project Name Information Technology Upgrade

Expected Life of Item 5 (Yrs) Is this a replacement Item YES Are Add'l Pages Attached YES

Total Current Estimated Cost \$ 25,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No but searching If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? YES

If yes, has this been completed? YES (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y N

Part II

Replace (11) XP based workstation computers which are non-supported as of May 2014, therefore susceptible to hackers, these are machines that are over 5 years old and are at the end of life. In addition All servers should be virtualized, eliminating a single point of failure, which exists now. Upgrade and physical infrastructure with current high speed cabling, improving performance and reliability. Emergency power system upgraded so if building generator failed portable generators could be deployed to power critical components required to function until repairs are made.

Police Department network and communications is the source for communications between the towns Police, Fire, Highway Department, failure of our systems is not optional.

PLEASE SEE ATTACHED EXECUTIVE SUMMARY SUPPLIED BY IT SPECIALIST BRIAN ALLEY

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):

The long-term impact of these improvements will be a reduction of costs relating to repair of IT related issues as well as loss of manpower and time invested in constant maintenance and repairs. We suffer constant IT issues such as server down time, loss of information, ect due to inadequate and poorly designed structure. This investment is designed to comprehensively address a critical area of infrastructure concerning the public safety of our town.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

XP workstations to be replaced are anywhere from 5 to 12 years old

Executive Summary

The Information network is housed at the Police station located at 20 Westford Rd. It is the *only* site that maintains the departments electronic data collected since the 1980's. The network is comprised of Windows based servers running Dispatch/Records Management software and is the sole method of recording all the departments' activities, as well as, "office type" applications for word processing and spreadsheets used to manage various correspondents and financial record keeping tasks.

Hardware

The Police Department has twenty six (26) computers in the building. Of these eleven (11) XP based workstation computers, seven (7) Windows 7 workstations, and two (2) servers running Windows Server 2008. Additionally, there are six (6) workstations in the Dispatch Center that are part of the radio system or the State records and 911 system, also running Windows XP. These are not part of, but do interface with the Information network. Additionally, several mobile computers mounted in cruisers are used to interface with the State and Federal networks, providing access to criminal and motor vehicle records, as well as the Department network.

This hardware is comprised of varied components, some brand-named systems and some "white label" systems. None are under warranty and several are more than 5 years old. All the Windows XP systems are at "End of Life" and effective April 2014 security updates and patches will no longer be available from Microsoft.

Physical Plant

The Physical Plant is comprised of network cabling, electrical power and physical security. The network cabling, installed in 1991, is original to the building. It is not capable of functioning at today's higher speeds. The current speed is between 10Mbps and 100Mbps depending on various factors, current industry standard are 1Gbps and is 10 times faster than the current highest speed in the building.

All systems are connected to battery backups (UPS) to help manage power failures, however these are all consumer grade devices and the age of these UPS devices is unknown, the manufacturer recommends a 3-5 year life cycle. The department maintains a single commercial emergency generator, installed in 1991, and is tested weekly.

The servers are located in a separate office that is locked and has limited access, all workstations are within the direct control of Department personnel. Mobile devices are hard mounted. Physical security is not an issue within the building, however mobile devices are not encrypted to protect access to information should a mobile device be lost or stolen.

External Access

All systems have access to the Internet via a Comcast broadband connection. Internet access is used to conduct searches and access information related to the department activities. This access is unfiltered and is not monitored. Remote access to the Departments network is available via a Virtual Private Network appliance (VPN). VPN access is used by the Departments command staff, School Resource Officer and others on an as needed basis. This appliance will become "end of life" in 2015.

Long Term Actions:

Upgrade the physical infrastructure with current high-speed cabling. Replacing the original wiring would improve performance and reliability of the network. Design the emergency power system so that when the building generator fails portable generators could be deployed to power critical components required to function until repairs are made. Implement regular backups of all critical workstations to improve recovery times and reduce downtime. Implement scheduled maintenance of all UPS and computer systems that would include battery replacement and bi-annual cleaning of workstations.

Mobile devices should be encrypted to prevent unauthorized access to data should the device become lost or stolen. Locator technology could also be employed to aid in recovering the device.

Establish an alternate communications center that would permit access to the Department computer network and radio systems.

Cost Projections

The estimated costs for "Immediate Actions" items are being obtained from the State bid list and phone quotes. Typically the pricing on the State bid list is outdated and better pricing can be obtained through open bidding.

"Long Term Actions" items can be estimated, however accurate costs cannot be determined until the time of purchase.

Grants can be used to help offset some of these expenditures and should be researched, however steps should be taken to address the "Immediate Actions" items sooner rather than later.



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 210-15-02 Dept Name Police Department Contact Person/Tel # 978-649-7504

Prepared by; Chief Richard D. Howe Signature  Date 1/30/14

Fiscal Year Needed 2015 Project Name Building Window replacement

Expected Life of Item 15 (Yrs) Is this a replacement Item YES Are Add'l Pages Attached YES

Total Current Estimated Cost \$ 20,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? NO If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? NO
If yes, has this been completed? NO (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y N

Part II

Replace (22) original wood framed single pane windows with vinyl high efficiency windows as well as install bars or security screen in lower windows frames of building.

The lower windows of the building are not designed for requirements of a Police Department concerning security, access to prisoners, ect. Someone could easily break a window on ground level and enter the building.

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

The long-term impact of these improvements will be a reduction of heating and cooling costs of the building. The installation of the security bars / security screen in the first floor windows will mitigate liability the town has if someone makes access to the building. This is serious issue regarding the safety of police employees as well as prisoners in the building; it also would fail to meet Massachusetts Police Accreditation Standards.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Original windows were installed in the building approximately 1986, their condition is poor, some fall out of their frame if opened and they allow cold air to easily enter the building. Some windows in the building have been replaced with vinyl high efficiency; this request would complete the goal of replacing all windows.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference Project Name; Building Window Replacement Tracking Number 210-15-02

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- (X) Present Equipment Obsolete
- (X) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- (X) Increased Safety
- () Improve Procedures, Records, Etc
- (X) Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item: 24 hours per day, 365 days per year

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 210-16-01 Dept Name Police Department Contact Person/Tel # 978-649-7504

Prepared by; Chief Richard D. Howe Signature Date 1/30/14

Fiscal Year Needed 2016 Project Name Building exterior Stairs & Railing repair / replacement

Expected Life of Item 5 (Yrs) Is this a replacement Item YES Are Add'l Pages Attached YES

Total Current Estimated Cost \$ 10,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No but searching If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? NO
If yes, has this been completed? (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y N

Part II

Replacement of metal railings on exterior staircases of building. They are rusting and becoming unstable. Repair or replacement of cement stairs which are damaged / cracking / crumbling. Repair drainage at the bottom of each exterior staircase as water pools at the bottom causing ice / dangerous conditions.

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

The long-term impact of these improvements will be mitigation of potential liability as well as maintain the overall upkeep of the Police Department Building.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replaced / Repaired items will be 30 years old as of 2016



**Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests**



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
 FY 2015 to FY 2019

Part I

Tracking # 210-16-02 Dept Name Police Department Contact Person/Tel # 978-649-7504

Prepared by; Chief Richard D. Howe Signature _____ Date 1/30/14

Fiscal Year Needed 2016 Project Name Parking Lot repaired / grades adjusted to match walkways / improper drainage repaired

Expected Life of Item 10 (Yrs) Is this a replacement Item YES Are Add'l Pages Attached

Total Current Estimated Cost \$ 35,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? NO
 If yes, has this been completed? (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y N

Part II

Paving of parking lot. Fix grade issues then properly line parking lot to indicate parking spaces for public & handicap. This is the original material installed in 1986 with the exception of some spots which have been repaired over the years. Several areas of the parking lot pool water which creates hazards thus increasing the town's liability.

Detailed explanation of impact on operating budget (Include Impact if funded, ie savings etc, and also if NOT funded):

The long-term impact of these improvements will be mitigation of potential liability as well as maintain the overall upkeep of the Police Department Building.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replaced / Repaired items will be 30 years old as of 2016.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name **Parking Lot repaired / grades adjusted to match walkways / improper drainage repaired** Tracking Number **210-16-02**

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement**
- Present Equipment Obsolete**
- Replace Worn Out Equipment**
- Reduce Personnel Time (ie, Payroll Savings)**
- Expanded Service**
- New Operation**
- Increased Safety**
- Improve Procedures, Records, Etc**
- Regulatory Compliance**

Usage: (Answer as appropriate)

Estimated Usage of Requested Item: 24 hours per day, 365 days per year

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
 FY 2015 to FY 2019

Part I

Tracking # 210-17-01 Dept Name Police Department Contact Person/Tel # 978-649-7504

Prepared by; Chief Richard D. Howe Signature _____ Date 1/30/14

Fiscal Year Needed 2017 Project Name Cell Blocks sanded and repainted, building interior repainted

Expected Life of Item 10 (Yrs) Is this a replacement Item NO Are Add'l Pages Attached

Total Current Estimated Cost \$ 10,000 Non-General Fund source: Voke School possible source

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? NO

If yes, has this been completed? (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y N

Part II

Cell blocks are beginning to show signs of rust, need to be sanded and repainted. Consists of 6 cell blocks. Building aging, walls need repairing and repainting.

Detailed explanation of impact on operating budget (Include impact if funded, le savings etc, and also if NOT funded):

The long-term impact of these improvements will be mitigation of potential liability as well as maintain the overall upkeep of the Police Department Building.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replaced / Repaired items will be 30 years old as of 2017, some areas of the department have been painted while others have original paint.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Cell Blocks sanded and repainted, building interior repainted
Tracking Number 210-17-01

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement**
- Present Equipment Obsolete**
- Replace Worn Out Equipment**
- Reduce Personnel Time (ie, Payroll Savings)**
- Expanded Service**
- New Operation**
- Increased Safety**
- Improve Procedures, Records, Etc**
- Regulatory Compliance**

Usage: (Answer as appropriate)

Estimated Usage of Requested Item: 24 hours per day, 365 days per year

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
 FY 2015 to FY 2019

Part I

Tracking # 210-18-01 Dept Name Police Department Contact Person/Tel # 978-649-7504

Prepared by; Chief Richard D. Howe Signature _____ Date 1/30/14

Fiscal Year Needed 2018 Project Name Central Air Conditioning

Expected Life of Item 15(Yrs) Is this a replacement Item NO Are Add'l Pages Attached NO

Total Current Estimated Cost \$ 30,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? NO If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? NO
 If yes, has this been completed? NO (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need?

Part II

Install Central Air Cooling system throughout the building. The dispatch & attached supervisors office is the only area in the building that has central air (the funding for that project was acquired through a grant to support communications)

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):

The long-term impact of these improvements will be a reduction of cooling costs of the building, numerous air conditioning units are installed throughout the building which are inefficient and costly. Further these units have limited capacity and as a result areas of the department such as the lock-up area where prisoners are located tends to be overheated. This creates an area of potential liability for the town. The installation of a central air conditioning system will result in a reduction of costs as this system is much more efficient than single air conditioning units, further an improvement in air quality for employees, guests and prisoners.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Replace all existing walled air conditioning units, most of which are between 5 and 20 years old.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference Project Name; Central Air Conditioning Tracking Number 210-18-01

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- (X) Present Equipment Obsolete
- (X) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- (X) Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item: 150 days per year

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
 FY 2015 to FY 2019

Part I

Tracking # 210-19-01 Dept Name Police Department Contact Person/Tel # 978-649-7504

Prepared by; Chief Richard D. Howe Signature [Signature] Date 1/30/14

Fiscal Year Needed 2019 Project Name Building Addition / Training Room

Expected Life of Item 20 (Yrs) Is this a replacement Item NO Are Add'l Pages Attached NO

Total Current Estimated Cost \$ 120,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? NO If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? NO
 If yes, has this been completed? NO (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y [N]

Part II

In the absence of a new police facility in the near future our training needs will require additional space. I propose building an addition above the existing sally-port; this addition would be used for a training room, allowing our department to initiate more internal training.

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

The long-term impact of these improvements will be a reduction of costs related to training. With a proper training facility we could host training events, when hosting, our department will be allowed to have our officer attend at no cost. It will also give us a proper environment to train in-house rather than sending officers off site at a much higher expense.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # _____ - _____ - _____ Dept Name SELECTMAN Contact Person/Tel # MCILWORTH@TYNGSBOROUGHMA.GOV
 Prepared by M. GILBERTO Signature (M) Date 2/3/2017
 Fiscal Year Needed 2015-2019 Project Name ROAD REPAIRS - ANNUAL APPROPRIATION

Expected Life of Item 20 (Yrs) Is this a replacement Item Y Are Add'l Pages Attached _____
 Total Current Estimated Cost \$ 2,000,000 ANNUALLY Non-General Fund source: \$350,000 - CHAPTER 90
 Was a Grant applied for in connection with this project? NO If yes, submit a copy _____
 Is a Design, Study, Bid Specification, or Consultant required for this project? YES
 If yes, has this been completed? YES (If yes, submit details and copies of documents including Consultant's Report)
(TEMPLATE)
 Is this a Regulatory Compliance Requirement? NO
 Urgent Need? (Y) N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

THIS AMOUNT, ANNUALLY, WHEN MATCHED W/ CHAPTER 90, WOULD COVER THE TOWN
THE NECESSARY FUNDING TO PROPERLY MAINTAIN ALL ROADS OVER A USEFUL LIFE OF 20 YRS.

Source of estimated cost (include copies of any backup information as appropriate):

ASSISTANT TOWN ADMINISTRATOR & MICHAEL SENIOR FOREMAN ESTIMATE.

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

DIFFERENTIAL WILL CAUSE ROAD CONDITIONS TO WORSEN.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

SEE ATTACHED SPREADSHEET



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name ROM REPAIRS Tracking Number _____

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 7 </u>
Average Hours per Day Used	<u> 24 </u>
Estimated Useful Life (in Years)	<u> 20 </u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # ___ - ___ - ___ Dept Name SELECTMEN Contact Person/Tel # M.GILLESBERG@TYNGSBOROUGH.MA.GOV
 Prepared by M. GILLESBERG Signature Date 2/3/2014
 Fiscal Year Needed 2015 Project Name SILENT ACCEPTANCE DOCUMENTS

Expected Life of Item N/A (Yrs) Is this a replacement Item NO Are Add'l Pages Attached ___
 Total Current Estimated Cost \$ 175,000 Non-General Fund source: NONE
 Was a Grant applied for in connection with this project? NO If yes, submit a copy
 Is a Design, Study, Bid Specification, or Consultant required for this project? NO
 If yes, has this been completed? ___ (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? **Y** **N** THE SELECTMEN HAVE IDENTIFIED THE COMPLETION OF
SILENT ACCEPTANCE AS A PRIORITY

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

THIS FUNDING WOULD ALLOW THE SELECTMEN TO GENERATE DOCUMENTS TO ACCEPT ROAD AT A FUTURE TOWN MEETING.

Source of estimated cost (include copies of any backup information as appropriate):

PLANNING BOARD ENGINEER'S ESTIMATE

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Street Acceptance Docs Tracking Number _____

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?

Months Use per Year

Number of Weeks Use per Year

Average Days per Week Used

Average Hours per Day Used

Estimated Useful Life (in Years)

N/A



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # ___ - ___ - ___ Dept Name SELECTMEN Contact Person/Tel # MGILLESPIE@TYNGSBOROUGHMA.GOV
 Prepared by M. GILLESPIE Signature [Signature] Date 2/3/2014
 Fiscal Year Needed 2015 Project Name WINSLOW SCHOOL CARPET REMOVAL & VENTILATION

Expected Life of Item ? (Yrs) Is this a replacement Item NO Are Add'l Pages Attached ___

Total Current Estimated Cost \$ 35,000 Non-General Fund source: CPC?

Was a Grant applied for in connection with this project? NO If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? YES
 If yes, has this been completed? NO (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? NO

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

THIS PROJECT WOULD IMPROVE VENTILATION & REMOVE POTENTIAL SOURCE OF UNHEALTHY AIR.

Source of estimated cost (include copies of any backup information as appropriate):

ESTIMATES

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):

FURTHER DEPRECIATION WILL INCREASE COST TO REPAIR/REPLACE BUILDING.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name WINSLOW SCHOOL - ^{CHANGING REMOVAL OF} VENTILATION Tracking Number _____

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- (x) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only? _____

Months Use per Year _____ 0 AT THIS TIME

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____ DEGRADING



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # _____ Dept. Name Selectmen Contact Person/Tel # 978-649-2300 x100

Prepared by Nina Nazarian Signature [Signature] Date 02/06/2014

Fiscal Year Needed FY15 Project Name Town Offices/Library Security & Repairs

Expected Life of Item N/A(Yrs) Is this a replacement Item Yes (Repairs) Are Add'l Pages Attached No

Total Current Estimated Cost \$30,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Scope (Bids or Quotes)

If yes, has this been completed? _____ (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? _____

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

- SECURITY: A walk through of the building with the Police Department has taken place and between the Library and the Town Offices there are a few areas in need of security measures.
- REPAIRS: The fascia and window trim must be repaired/repainted due to peeling to prevent rot and possibly leaks/mold.

Source of estimated cost (include copies of any backup information as appropriate):

- SECURITY: Estimated cost of \$9,000 is based pro-rated based on the cost for a security camera system (recently installed at the Council on Aging) and the cost of a security lock system for designated offices.
- REPAIRS: Estimated cost of \$21,000 is based on the attached cost estimate.

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

A potential cost for the repair of unaddressed painting could create a cost for repair of rot, leaks, and/or mold if unaddressed.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Town Offices/Library Security & Repairs Tracking Number _____

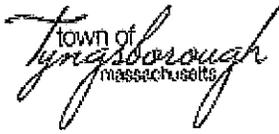
Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement** (Fascia and Trim must be repainted)
- Present Equipment Obsolete**
- Replace Worn Out Equipment**
- Reduce Personnel Time (ie, Payroll Savings)**
- Expanded Service**
- New Operation**
- Increased Safety** (Security System)
- Improve Procedures, Records, Etc**
- Regulatory Compliance**

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	No _____
Months Use per Year	<u>12</u> _____
Number of Weeks Use per Year	<u>52</u> _____
Average Days per Week Used	<u>7</u> _____
Average Hours per Day Used	<u>24</u> _____
Estimated Useful Life (in Years)	<u>Varies</u> _____



Town Offices roof

Michael P. Gilleberto <mgilleberto@tyngsboroughma.gov>

Fri, Feb 7, 2014 at 1:06 PM

To: Karyn Puleo <kpuleo@yahoo.com>

Cc: Nina Nazarian <nnazarian@tyngsboroughma.gov>

Karyn-

Nina spoke with George Trearchis and his opinion was that the roof is a 25 year roof, which would put the scheduled replacement at FY 2023.

In light of this, rather than submit a request that is outside of the date range, we are recommending that the roof be included in the building study request. This would package an analysis of the HVAC, sprinkler, insulation, and potential implications of the preceding items on the roof, into one request.

Please let me know your thoughts.

Michael

—

Michael P. Gilleberto
Town Administrator
Town of Tyngsborough

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Karyn Puleo <kpuleo@yahoo.com>

Fri, Feb 7, 2014 at 8:11 PM

Reply-To: Karyn Puleo <kpuleo@yahoo.com>

To: "Michael P. Gilleberto" <mgilleberto@tyngsboroughma.gov>

Cc: Nina Nazarian <nnazarian@tyngsboroughma.gov>

Sounds good. This should perhaps be "commented" when you present the BOS items to
CAMC

[Quoted text hidden]



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # _____ Dept. Name Selectmen Contact Person/Tel # 978-649-2300 x100

Prepared by Nina Nazarian Signature [Signature] Date 02/04/2014

Fiscal Year Needed FY15 Project Name Town Offices/Library Building Assessment (including, but not limited to building envelope, HVAC system and fire suppression system)

Expected Life of Item N/A(Yrs) Is this a replacement Item N/A Are Add'l Pages Attached No

Total Current Estimated Cost \$15,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Study
If yes, has this been completed? _____ (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? _____

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

1. BUILDING ENVELOPE: The Town Offices/Library building has historically suffered from heating and cooling losses due to construction issues (limited to no air/vapor barrier between the first floor and the attic and leakage in and out of exterior walls). These issues have been reviewed with a number of contractors and energy firms, however a formal review has not taken place by a professional building consultant.
2. HVAC SYSTEM: The Town Offices/Library building was constructed with an HVAC system that does not evenly heat and cool areas of the building. This will include a review of the controls, however it is anticipated that since the system is approaching its end of life (20 years) and would be a good time to review options for replacing a part or all of the system with an efficient system.
3. FIRE SUPPRESSION SYSTEM: In recent years, the fire suppression system has developed several air leaks. In FY14, within a one month time-frame, 3 leaks were identified and required repair, costing approximately \$4,000. Minor measures have been taken to protect the building from an air leak (which is larger than the system can handle, thereby causing water to fill the system and potentially damaging critical files or electronic components), however a large scale solution should be considered.

Source of estimated cost (include copies of any backup information as appropriate):
Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
Potential savings on heating and cooling with building envelope changes and HVAC replacements. Also, potential savings on emergency repairs of the fire suppression system.
 If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Town Offices/Library Building Assessment Tracking Number _____

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement** (HVAC System is nearing the end of its expected life)
- Present Equipment Obsolete**
- Replace Worn Out Equipment**
- Reduce Personnel Time (ie, Payroll Savings)**
- Expanded Service**
- New Operation**
- Increased Safety**
- Improve Procedures, Records, Etc**
- Regulatory Compliance**

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u>No</u> _____
Months Use per Year	<u>12</u> _____
Number of Weeks Use per Year	<u>52</u> _____
Average Days per Week Used	<u>6</u> _____
Average Hours per Day Used	<u>8</u> _____
Estimated Useful Life (in Years)	<u>Varies</u> _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 12017-171 Dept. Name Selectmen Contact Person/Tel # 978-649-2300 x100

Prepared by Nina Nazarian Signature [Signature] Date 02/17/2014

Fiscal Year Needed FY15 Project Name Demolition of Vacant Town Buildings
(292 Middlesex Road, 76 Frost Road, and 86 Frost Road)

Expected Life of Item N/A(Yrs) Is this a replacement Item Yes (Repairs) Are Add'l Pages Attached No

Total Current Estimated Cost \$19,363.62 Non-General Fund source: \$9,363.62 (Frost Rd. Park CPC)

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Scope (Bids or Quotes)
If yes, has this been completed? _____ (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? _____

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

The Board of Selectmen have expressed interest in pursuing a demolition by neglect by-law. Not only has there been discussion on cleaning up the Town's vacant properties, but implementing such a by-law may impact the Town, requiring the vacant buildings to be addressed.

Source of estimated cost (include copies of any backup information as appropriate):

Office estimate, based on building demolition estimates of similar sizes.

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Demolition of Vacant Town Buildings Tracking Number _____

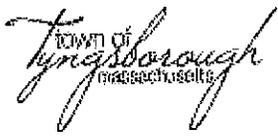
Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	N/A _____
Months Use per Year	N/A _____
Number of Weeks Use per Year	N/A _____
Average Days per Week Used	N/A _____
Average Hours per Day Used	N/A _____
Estimated Useful Life (in Years)	N/A _____



Balance in Frost Road Park CPC Account

Kerry Colburn-Dion <kcolburn@tyngsboroughma.gov>
To: Nina Nazarian <nnazarian@tyngsboroughma.gov>

Fri, Feb 14, 2014 at 6:07 PM

The balance is \$9,363.62 which could be used to demolish the buildings on the property.

--

Kerry Colburn-Dion
Finance Coordinator / Treasurer
Town of Tyngsborough
25 Bryants Lane
Tyngsborough, MA 01879
978-649-2300 Ext. 125
978-649-2327 Fax
kcolburn@tyngsboroughma.gov

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**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2018**

Part I

Tracking # 193 - 15 - 01 Dept Name Information Technology Contact Person/Tel # Gilleberto x100

Prepared by M. Gilleberto Signature  Date 3-19-2014

Fiscal Year Needed FY 2015 Project Name New Town Offices Computer Equipment

Expected Life of Item 5 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached

Total Current Estimated Cost \$ \$15,000 Non-General Fund source:

Was a Grant applied for in connection with this project? If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Potentially
If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

Replacement of Town Hall servicer and backup, along with associated desktop units that serve as the backbone of Town Offices financial and permitting systems

Source of estimated cost (include copies of any backup information as appropriate):
Estimate from consultant's review

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
Without improvement to backbone systems, valuable staff time will continue to be lost to "bug" troubleshooting caused by a mishmash of equipment. The Town will definitively be required to fund a new IT position.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced
Range of 3-10 years old



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2014 to FY 2018

Reference: Project Name Town Offices Computer Equipment Tracking Number 541-15-01

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- (X) Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- () Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	No _____
Months Use per Year	12 _____
Number of Weeks Use per Year	52 _____
Average Days per Week Used	5 _____
Average Hours per Day Used	8 _____
Estimated Useful Life (in Years)	5 _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2018**

Part I

Tracking # 146 - 17 - 01 Dept Name Tax Collector Contact Person/Tel # Gene Spickler x128

Prepared by M. Gilleberto Signature  Date 3-19-2014

Fiscal Year Needed FY 2017 Project Name Tax Collector's Software Conversion

Expected Life of Item 5-10 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached

Total Current Estimated Cost \$ 35,000 Non-General Fund source:

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Yes, RFP.

If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

Purchase of a new software package would allow for direct integration between the Tax Collector's office and the Treasurer and Accountant

Source of estimated cost (include copies of any backup information as appropriate):

Quote

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

Funding this improvement is anticipated to reduce duplication of efforts between financial offices

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

Software from a different vendor currently in place is 24 years old (but has been updated intermittently as technology advances)



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2014 to FY 2018

Reference: **Project Name Tax Collector’s Software** **Tracking Number 146-17-01**

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement**
- Present Equipment Obsolete**
- Replace Worn Out Equipment**
- Reduce Personnel Time (ie, Payroll Savings)**
- Expanded Service**
- New Operation**
- Increased Safety**
- Improve Procedures, Records, Etc**
- Regulatory Compliance**

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u>No</u>
Months Use per Year	<u>12</u>
Number of Weeks Use per Year	<u>52</u>
Average Days per Week Used	<u>5</u>
Average Hours per Day Used	<u>7.5; 4 on Friday</u>
Estimated Useful Life (in Years)	<u>5-10</u>



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2018**

Part I

Tracking # 541 - 15 - 01 Dept Name Council on Aging Contact Person/Tel # Barbara Reynolds x9211

Prepared by M. Gilleberto Signature MP Date 3-19-2014

Fiscal Year Needed FY 2015 Project Name New Senior Center Furniture, Fixtures, and Equipment

Expected Life of Item 20 (Yrs) Is this a replacement Item No Are Add'l Pages Attached

Total Current Estimated Cost \$ 25,000 Non-General Fund source: Friends of the CoA; Developer?

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Potentially

If yes, has this been completed? No (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

New Senior Center estimated to be completed late 2014 or early 2015 will require outfitting

Source of estimated cost (include copies of any backup information as appropriate):

Estimate

Detailed explanation of impact on operating budget (include impact if funded, ie savings etc, and also if NOT funded):

Without FFE, the building will not be functional

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced

New Building



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2014 to FY 2018

Reference: Project Name **New Senior Ctr FFE** Tracking Number **541-15-01**

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	No _____
Months Use per Year	<u>12</u> _____
Number of Weeks Use per Year	<u>52</u> _____
Average Days per Week Used	<u>5</u> _____
Average Hours per Day Used	<u>8</u> _____
Estimated Useful Life (in Years)	<u>30-50</u> _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 2014-01 Dept. Name TOS Contact Person/Tel # D. C. AMPA
 Prepared by D. C.ampa Signature [Signature] Date 4/5/2013
 Fiscal Year Needed 2015 Project Name FACILITY Condition Assessment

Expected Life of Item 1 (Yrs) Is this a replacement Item Are Add'l Pages Attached

Total Current Estimated Cost \$80,000 Non-General Fund source:

Was a Grant applied for in connection with this project? NO If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project?
 If yes, has this been completed? (If yes, submit details and copies of documents
 including Consultant's Report)

Is this a Regulatory Compliance Requirement?

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

To provide current assessment including security

Source of estimated cost (include copies of any backup information as appropriate):

Discussion with some vendors

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

No current budget \$ available

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name FACILITY Assessment Tracking Number 310-14-01

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 301-1402 Dept. Name TPS Contact Person/Tel # D Ciampa
 Prepared by D Ciampa Signature [Signature] Date 2/5/2014
 Fiscal Year Needed 2015 Project Name TMS FIRE ESCAPE REFURBISH

Expected Life of Item 10 (Yrs) Is this a replacement Item Are Add'l Pages Attached

Total Current Estimated Cost \$17,500 Non-General Fund source:

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? No
 If yes, has this been completed? (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement?

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

Recommended to be Refurbished by inspectional service

Source of estimated cost (include copies of any backup information as appropriate):

inspectional service

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):

No current budget \$\$ available

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name TMS FIRE ESCAPE REFINISH Tracking Number J00-14-02

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019

Part I

Tracking # 300-14-03 Dept. Name TPS Contact Person/Tel # D Ciampa
 Prepared by D Ciampa Signature [Signature] Date 2/5/2014
 Fiscal Year Needed 2015 Project Name Security upgrades TPS

Expected Life of Item 5 (Yrs) Is this a replacement Item Are Add'l Pages Attached

Total Current Estimated Cost TBD Non-General Fund source:

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Yes

If yes, has this been completed? No (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement?

Urgent Need? Y (N)

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:
Long term planning and expert assessment of secured entrances

Source of estimated cost (include copies of any backup information as appropriate):
TBD

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
Long term Planning

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Security Upgrades TPS Tracking Number 300-14-03

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 300-14-04 Dept. Name TPS Contact Person/Tel # D. Ciampa
 Prepared by D. Ciampa Signature [Signature] Date 2/5/2014
 Fiscal Year Needed 2015 Project Name Technology

Expected Life of Item 5 (Yrs) Is this a replacement Item Are Add'l Pages Attached

Total Current Estimated Cost \$ 50,000 Non-General Fund source: _____

Was a Grant applied for in connection with this project? If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? _____
 If yes, has this been completed? _____ (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? _____

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:
ongoing unfunded operational budget item

Source of estimated cost (include copies of any backup information as appropriate):
ongoing

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
increased technology service delivery

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference: Project Name Technology - TPS Tracking Number 30-14-04

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) 5+



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # _____ Dept. Name Schools Contact Person/Tel# G.Trearchis (978-551-4281)

Prepared by Don Ciampa Signature _____ Date 02/17/2014

Fiscal Year Needed FY15 Project Name TES Driveway Culvert Improvements

Expected Life of Item 20 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached Yes

Total Current Estimated Cost \$130,000.00 Non-General Fund source: \$92,104.00 (HMGP Grant)
A review of available funding is being conducted to determine if the \$37,896.00 (balance) is available through the
TES "remediation" fund.

Was a Grant applied for in connection with this project? Yes If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Design/Bid Specification
If yes, has this been completed? _____ (If yes, submit details and copies of documents
Including Consultant's Report)

Is this a Regulatory Compliance Requirement? _____

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of
significance and reason for timing:

Remove the undersized culvert located below the Tyngsborough Elementary School driveway and replace
the culvert with a properly sized culvert. The Federal Emergency Management Agency, through its Hazard
Mitigation Grant Program has awarded the Town a grant in the amount of 75% of the total estimated project
cost.

Source of estimated cost (include copies of any backup information as appropriate):
Engineering cost estimate (see attached) _____

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
Upon damage occurring to the primary driveway after a significant rain/flood event, the School Department
has in the past been able to open the school by permitting vehicular access via the emergency access lane.
This has led to a need to reconstruct the emergency access lane, which was built for intermittent emergency
vehicle access only. Therefore, any future damage to the primary driveway may require the closure of the
school until primary access is restored.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of
equipment to be replaced.



Town of Tynngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019

Part I

Tracking # _____ Dept. Name Schools Contact Person/Tel# G. Trearchis (978-551-4281)

Prepared by Don Ciampa Signature _____ Date 02/17/2014

Fiscal Year Needed FY15 Project Name TES Driveway Culvert Improvements

Expected Life of Item 20 (Yrs) Is this a replacement Item Yes Are Add'l Pages Attached Yes

Total Current Estimated Cost \$130,000.00 Non-General Fund source: \$92,104.00 (HMGP Grant)
A review of available funding is being conducted to determine if the \$37,896.00 (balance) is available through the TES "remediation" fund.

Was a Grant applied for in connection with this project? Yes If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Design/Bid Specification
 If yes, has this been completed? _____ (If yes, submit details and copies of documents
 Including Consultant's Report)

Is this a Regulatory Compliance Requirement? _____

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

Remove the undersized culvert located below the Tynngsborough Elementary School driveway and replace the culvert with a properly sized culvert. The Federal Emergency Management Agency, through its Hazard Mitigation Grant Program has awarded the Town a grant in the amount of 75% of the total estimated project cost.

Source of estimated cost (include copies of any backup information as appropriate):
Engineering cost estimate (see attached)

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
Upon damage occurring to the primary driveway after a significant rain/flood event, the School Department has in the past been able to open the school by permitting vehicular access via the emergency access lane. This has led to a need to reconstruct the emergency access lane, which was built for intermittent emergency vehicle access only. Therefore, any future damage to the primary driveway may require the closure of the school until primary access is restored.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced.



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 600-15-00 Dept Name Sewer Dept Contact Person/Tel # Jeff Hannaford

Prepared by Caryn DeCarteret Signature _____ Date _____

Fiscal Year Needed: 2015 Project Name Phase I West Construction and Administration

Expected Life of Item _____ (Yrs) Is this a replacement Item No Are Add'l Pages Attached Yes

Total Current Estimated Cost \$ 7,300,000 Non-General Fund source: SRF Funding

Was a Grant applied for in connection with this project? No** If yes, submit a copy ** Massworks Grant may be applicable

Is a Design, Study, Bid Specification, or Consultant required for this project? Yes
If yes, has this been completed? Yes (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:
Phase I West Construction and Administration

Source of estimated cost (include copies of any backup information as appropriate):

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
Betterments will be assessed.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference:

Project Name Phase I West Construction and Administration **Tracking Number** 600- 15 -00

Purpose of expenditure: (Check as appropriate)

- () Scheduled Replacement
- () Present Equipment Obsolete
- () Replace Worn Out Equipment
- () Reduce Personnel Time (ie, Payroll Savings)
- (X) Expanded Service
- () New Operation
- () Increased Safety
- () Improve Procedures, Records, Etc
- () Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only?	<u> No </u>
Months Use per Year	<u> 12 </u>
Number of Weeks Use per Year	<u> 52 </u>
Average Days per Week Used	<u> 7 </u>
Average Hours per Day Used	<u> 24 </u>
Estimated Useful Life (in Years)	<u> </u>



Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019

Part I

Tracking # 600- Dept Name Sewer Dept Contact Person/Tel # Jeff Hannaford

Prepared by Caryn DeCarteret Signature _____ Date _____

Fiscal Year Needed: To be determined Project Name Phase II Design

Expected Life of Item _____ (Yrs) Is this a replacement Item No Are Add'l Pages Attached Yes

Total Current Estimated Cost \$ 849,000 Non-General Fund source: Retained Earnings

Was a Grant applied for in connection with this project? No If yes, submit a copy

Is a Design, Study, Bid Specification, or Consultant required for this project? Yes
 If yes, has this been completed? Yes (If yes, submit details and copies of documents
 including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

Phase II Design -- Middlesex Rd north

Source of estimated cost (include copies of any backup information as appropriate):

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
The design portion of Phase II (approximately \$849,000) will be paid out of Retained Earnings.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference:

Project Name Phase II Design **Tracking Number** 600-

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement**
- Present Equipment Obsolete**
- Replace Worn Out Equipment**
- Reduce Personnel Time (ie, Payroll Savings)**
- Expanded Service**
- New Operation**
- Increased Safety**
- Improve Procedures, Records, Etc**
- Regulatory Compliance**

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only? _____

Months Use per Year _____

Number of Weeks Use per Year _____

Average Days per Week Used _____

Average Hours per Day Used _____

Estimated Useful Life (in Years) _____



**Town of Tyngsborough
Capital Project Item Justification Request
Five Year Plan - Form 1
FY 2015 to FY 2019**

Part I

Tracking # 600- Dept Name Sewer Dept Contact Person/Tel # Jeff Hannaford

Prepared by Caryn DeCarteret Signature _____ Date _____

Fiscal Year Needed: To be determined Project Name Phase II Construction and Administration

Expected Life of Item _____ (Yrs) Is this a replacement Item No Are Add'l Pages Attached Yes

Total Current Estimated Cost \$ 9,669,000 Non-General Fund source: SRF Funding

Was a Grant applied for in connection with this project? No** If yes, submit a copy ** Massworks Grant may be applicable

Is a Design, Study, Bid Specification, or Consultant required for this project? Yes
If yes, has this been completed? Yes (If yes, submit details and copies of documents including Consultant's Report)

Is this a Regulatory Compliance Requirement? No

Urgent Need? Y N

Part II

Detailed description to include explanation of need, general specifications, with explanation of significance and reason for timing:

Phase II Construction and Administration – Middlesex Rd north

Source of estimated cost (include copies of any backup information as appropriate):

Detailed explanation of impact on operating budget (Include impact if funded, ie savings etc, and also if NOT funded):
Betterments will be assessed.

If item is replacing a like item (including vehicles or equipment), list age, condition, mileage etc of equipment to be replaced



Town of Tyngsborough
Capital Project Supplemental Information For Equipment Requests
Five Year Plan – Form 1
FY 2015 to FY 2019

Reference:

Project Name Phase II Construction and Administration **Tracking Number** 600-

Purpose of expenditure: (Check as appropriate)

- Scheduled Replacement
- Present Equipment Obsolete
- Replace Worn Out Equipment
- Reduce Personnel Time (ie, Payroll Savings)
- Expanded Service
- New Operation
- Increased Safety
- Improve Procedures, Records, Etc
- Regulatory Compliance

Usage: (Answer as appropriate)

Estimated Usage of Requested Item:

Will this item be used on a seasonal basis only? No

Months Use per Year 12

Number of Weeks Use per Year 52

Average Days per Week Used 7

Average Hours per Day Used 24

Estimated Useful Life (in Years) _____



Caryn DeCarteret < cdecarteret@tyngsboroughma.gov>

Revised Project Cost

Rosemary Blacquier < rblacquier@woodardcurran.com>

Mon, Mar 17, 2014 at 4:53 PM

To: "cdecarteret@tyngsboroughma.gov" <cdecarteret@tyngsboroughma.gov>

Cc: Ken Carlson <kcarlson@woodardcurran.com>

Ken updated Phase 2 to \$10,518,000 (2011 \$ to 2014\$).

I will send betterment spreadsheet tomorrow am.

Rosemary

-----Original Message-----

From: cdecarteret@tyngsboroughma.gov [mailto:cdecarteret@tyngsboroughma.gov]

Sent: Monday, March 17, 2014 2:46 PM

To: Ken Carlson

Cc: Rosemary Blacquier

Subject: Re: Revised Project Cost

[Quoted text hidden]

[Quoted text hidden]

MEMORANDUM



TO: Tyngsborough Sewer Commission
FROM: Jonathan E. Himlan, P.E.
DATE: July 22, 2011 – **Revised Cost Table - March 14, 2014**
RE: Preliminary Project Cost Estimate for the Phase 1 and Phase 2 Sewer Extensions
Task Order No. 2011-3

In accordance with Task Order Number 2011-3 between Woodard & Curran (W&C) and the Town of Tyngsborough, W&C has prepared this memorandum to provide a preliminary cost estimate for the Phase 1 and Phase 2 Sewer Extensions and to summarize W&C's basis for the preliminary cost estimate. The preliminary project costs for the Phase 1 and Phase 2 Sewer Extension were divided into three Project Areas as follows:

1. Phase 1 East - Sunset Park (refer to the attached **Figure 1**)
2. Phase 1 West - Flint Pond (refer to the attached **Figure 2**)
3. Phase 2 - Merrimack West and Middlesex North (refer to the attached **Figure 3**)

W&C prepared an estimated preliminary cost for the three Project Areas. The following table summarizes the preliminary project cost estimate and the attached **Tables 1 through 6** provide the supporting detail to the estimates.

	Phase 1 West - Flint Pond	Phase 1 East - Sunset Park	Phase 2 - Merr. West, Midd. North
Construction Cost	\$ 4,830,000	\$ 3,350,000	\$ 7,960,000
Design	\$ 523,000	\$ 396,000	\$ 755,000
Construction Administration	\$ 386,000	\$ 268,000	\$ 637,000
Total Project Cost	\$ 5,740,000	\$ 4,010,000	\$ 9,350,000

These preliminary project cost estimates were based on a preliminary design prepared by W&C which consisted of the following:

1. Calculating the projected design flow for the new service areas.
2. Determining the size and layout of proposed infrastructure (gravity sewers, low pressure sewers, pump stations and force mains) to service the three Project Areas.
3. Preparing the proposed preliminary design criteria for the new infrastructure.
4. Modeling and assessing the existing sewer infrastructure and its ability to receive the projected design flows.

The following sections describe W&C's preliminary design and associated evaluations in more detail.

Projected Design Flow

W&C calculated the projected design flow for the three Project Areas to determine the required pipe and pump station sizes for the preliminary design and to assess existing infrastructure capacity. The attached **Tables 7 through 11** provide a summary of the land use and zoning of each parcel with the designated unit flow values, projected average daily flow (ADF), and projected peak hourly flow (PHF), and the ultimate design flow for the three Project Areas.

