

PROJECT #	PROJECT NAME:	0	Commission Dist.	PRIORITY																				
GENERAL PROJECT DATA:		PLANNING INFORMATION:	PROJECT NEED CRITERIA	PROJECT SCHEDULE	FY22				FY23				FY24				FY25				FY26			
Project Name:					1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Type:					Project listed in plan? (Y/N)	Safety		Procure																
Department:					SGMP/other plan reference:	Health		Land/ROW																
Location (Lat./Long.):					New, Replace or Renovate?	Sustainable		Design/Engineer																
Contact Information:		Growth Related? (Y/N)	Efficiency		Construct/Equip																			

**PROJECT DESCRIPTION:**

**PROJECT RATIONALE (Include how project maintains and/or enhances existing services):**

**DETAILED PROJECT SCOPE TASKS:**

**Procurement Type**

Land (or ROW)		
Design/ Arch/Eng.		
Construction		
Equip/Furnish		
Other		

	Prior Spent/ Commit.	FY 21 Budget	FY22	FY23	FY24	FY25	FY26	Future Years	Proposed Project Total
<b>EXPENDITURE PLAN</b>									
Land (or ROW)									0
Design/Arch/Eng.									0
Construction									0
Equip/ Furnish									0
Other									0
<b>Total Project Cost</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>FUNDING PLAN</b>									
Fund 1:									0
Fund 2:									0
Fund 3:									0
<b>Unfunded</b>									<b>0</b>
<b>Total Funding</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>OPERATING BUDGET IMPACT</b>									
	<b>Fund</b>	<b>Cost Center</b>							
Personnel									
Non-Personnel									
<b>Total Operating</b>			<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Graphic/map