

TOWN OF PLYMOUTH CAPITAL IMPROVEMENT PLAN REQUEST FORM
FY25 ANNUAL FALL TOWN MEETING REQUEST FORM

Department: SEWER DIVISION		TWO
Project Title and Description: Sewer System Improvements	Total Project Cost:	\$200,000.00

Department/Division Head: **Doug Pinard**

Cost estimate was developed: Internally Externally

Basis of Estimated Costs (attach additional information if available)			If project has impact on 5 Year Plan and future operating budgets, insert estimated amounts.		
Capital:	Cost	Comments	Fiscal Year:	Capital	O & M
<i>Planning and Design</i>			<i>FY25</i>		
<i>Labor and Materials</i>	\$200,000.00		<i>FY26</i>		
<i>Administration</i>			<i>FY27</i>		
<i>Land Acquisition</i>			<i>FY28</i>		
<i>Equipment</i>			<i>FY29</i>		
<i>Other</i>					
<i>Contingency</i>					
Total Capital	\$200,000.00				

Possible sources and amounts of funding, if known: _____

Project Justification and Objective: ___ This appropriation of funds will give the Town of Plymouth Sewer department the ability to pay invoices for contractor/s for emergency services related to 24-hour, 7-days per week, on-call emergency services to repair and or replace, sewer infrastructure in the Town of Plymouth.

For Capital Project Requests:

Will this project be phased over more than one fiscal year? If yes, enter it on the next 5 Year Plan Yes No
 Can this project be phased over more than one fiscal year? Yes No

For Capital Equipment Requests:

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

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Attach additional information, estimates, or justification.