

Appendix P: Capital Spending Request – Curling Brine Chiller – (August 17, 2017) City of Fernie



The City of Fernie

PROJECT/CAPITAL PROJECT REQUEST FORM (0 - 5 Years Out)

Form is to ensure financing available for proposed Ideas and project/capital approved by CAO prior Council Approval

I. INFORMATION

(Form for new Operational Projects or Capital Projects that commence within the next five years)

PROJECT/CAPITAL: Arena / Curling rink Chiller \$250,000

DESCRIPTION: Curling rink and Arena Chiller- combined

DATE: Aug-17 COMMENCEMENT DATE: 1-May-18

PERSON RESPONSIBLE: [REDACTED] COMPLETION DATE: 30-Jun-18

DEPARTMENT: Leisure Services ASSET LIFE: 20 years

TOTAL AMOUNT:	\$
7% PST:	\$
ESTIMATED TOTAL AMOUNT REQUIRED (Including PST):	\$ 250,000.00

II. HISTORY

IS CAPITAL IN THE 20 YEAR PLAN? YES NO

IF YES, HOW MUCH BUDGETED? \$ 200,000.00

IF YES, WHAT WAS PROJECT REQUEST OR REFERENCE NAME AND ACCOUNT NUMBER FOR CODING? Arena / Curling rink Chiller

IF PREVIOUS PROJECT, WAS IT APPROVED BY COUNCIL? YES NO

IF YES, GIVE DATE OF MINUTES (attach resolution): _____

WILL PUBLIC CONSULTATION BE REQUIRED? YES NO

DOES THIS PROJECT FIT WITHIN THE COUNCILS CURRENT GOALS AND OBJECTIVES? YES NO

IF YES, DESCRIBE HOW PROJECT FITS WITHIN THE CURRENT GOALS AND OBJECTIVES.
IF NO, BRIEFLY DESCRIBE THE RELEVANCE OF PROJECT:

Build and maintain a well planned City and infrastructure that balances social, economic and environmental values and contributes to an excellent quality of life.

DESCRIPTION	DATE REQUIRED	AMOUNT REQUIRED
replace anrena and curling rink chiller - with one unit	summer 2018	\$ 250,000.00

TOTAL CAPITAL REQUEST (excluding tax)	\$	
PST 7%		
TOTAL CAPITAL COST REQUESTED (including tax)	\$	250,000.00

ARE THERE GRANTS or DONATIONS AVAILABLE TO HELP FUND THIS PROJECT?

YES NO

**ATTACH ANY DOCUMENTATION AVAILABLE TO SUPPORT.*

IF YES LIST GRANT/S AND AMOUNTS: Possible grants -may come up in 2018 \$ _____

_____ \$ _____

_____ \$ _____

ARE THERE AND WHAT RESERVE FUNDS ARE AVAILABLE TO HELP FUND THIS PROJECT?

YES NO N/A

IF YES LIST RESERVE/S AND AMOUNTS: _____ \$ _____

_____ \$ _____

_____ \$ _____

IV. REQUIRED ATTACHMENTS

ESTIMATE ATTACHED: YES NO

INITIAL RISK ASSESSMENT COMPLETED (USE TEMPLATE) : YES NO

REQUESTING MANAGER SIGNATURE	DATE
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V. CAO & FINANCE COMMENT

CHIEF ADMINISTRATIVE OFFICER COMMENTS - (Will inform if project/capital is approved as is, if further documentation required or if formal report needs to be brought to Council.)

FINANCE DEPARTMENT COMMENTS - (Will inform if funds available or if further documentation required.)

VI. REQUIRED FOR FINAL APPROVAL (Provide sufficient time for request to be approved prior to Council's final budget approval)

**CAO support and Financial approval given prior to completion of the next steps.*

FULL PROJECT REPORT COMPLETE: YES NO N/A
**Attach document.*

FULL RISK ASSESSMENT COMPLETE (USE TEMPLATE): YES NO N/A
**Attach document.*

REPORT SUBMITTED TO COMMITTEE OF THE WHOLE: YES NO N/A
**Include report*

BUDGET APPROVAL GIVEN BY COUNCIL: YES NO N/A
**Include resolution.*

VII. FINAL SPENDING APPROVAL (only granted if full project report complete & Council, CAO & Finance Dept approval given)

DIRECTOR OF FINANCE	CHIEF ADMINISTRATIVE OFFICER
DATE	DATE