TOWN OF READFIELD

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Capital Expenditure Request Form

Requestor Information

Date	
Submitted By (print name and sign)	
Submitted For (committee, dept., etc.)	
Phone	
Email	

Executive Summary

Project / Item Name	
Project / Item Description	
Total Amount of Request	
Fiscal Year of Request	
Budget Department(s)	
Project Start Date	
Project End Date	
Estimated Lifespan	
New or Replacement?	

Narrative *(Responses to topics should be brief and concise. Long narratives are not the goal of this form.)*

If this is a replacement, what is the condition and value of the current asset and what are the consequences of not doing this project at this time?

Are there alternative solutions? If so explain why the proposed alternative is preferred?

Reason for investment or expenditure:

Financial Impact

Source of Funds:

Use of Funds:

Incremental Financial Costs (Operational Impact, e.g., utilities, etc.):

Assumptions:

Revenue (if applicable):

Operating Expense:

Debt Capacity:

Intangible and Other Benefits:

Risks associated with investment and not making investment:

Other Relevant Comments / Conclusion: