



FLORIDA DEPARTMENT *of* STATE

CIP-5

Capital Renewal Projects

(Not Applicable)

CIP-5: Service-Level Capital Renewal Projects

Agency:	Department of State	LAS/PBS Budget Entity Code:							
Service:	Not Applicable	Appropriation Category Code:							
Project Title:		Agency Priority:							
		LRPP Narrative Page:							
To be constructed by: Contract _____ Force account _____									
Level of Aggregation:									
<input type="checkbox"/> Service <input type="checkbox"/> Institution/Campus (SUS/SBCC only): _____ <div style="text-align: center;">NAME</div>									
Major Repair Project? (Y/N) (If Yes, complete Parts A, D & E; if No, complete Parts A, B & C.)			N						
Critical Need? (Y/N) (If Yes, all funding must be requested in the first two fiscal years.)			N						
PART A: SYSTEM IDENTIFICATION									
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> BUILDING SYSTEM GROUP Annual group request? _____ electrical (BE) _____ envelope (BX) _____ interior (BI) _____ mechanical (BM) _____ plumbing (BP) _____ roof (BR) _____ site (BG) _____ special (BD) _____ structural (BS) _____ </td> <td style="width: 33%; vertical-align: top;"> CENTRAL UTILITY SYSTEM GROUP Annual group request? _____ cogeneration (UG) _____ cooling gen./distrib. (UC) _____ electric distrib. (UD) _____ heating gen./distrib. (UH) _____ landfill (UL) _____ water treat./distrib. (UW) _____ waste treatment (US) _____ </td> <td style="width: 33%; vertical-align: top;"> CODE AND LICENSURE CORRECTION GROUPS Licensure (LC) _____ Annual request? _____ Life Safety _____ Annual request? _____ Handicapped (LH) _____ Annual request? _____ Environmental (LE) _____ Annual request? _____ </td> </tr> <tr> <td style="vertical-align: top;"> SPECIAL SYSTEM GROUP Annual group request? _____ energy conservation (SC) _____ storage tanks (BX) _____ </td> <td style="vertical-align: top;"> CAMPUS SYSTEM GROUP Annual group request? _____ drainage/grounds (CG) _____ road system paving (CR) _____ other paving (CP) _____ </td> <td></td> </tr> </table>				BUILDING SYSTEM GROUP Annual group request? _____ electrical (BE) _____ envelope (BX) _____ interior (BI) _____ mechanical (BM) _____ plumbing (BP) _____ roof (BR) _____ site (BG) _____ special (BD) _____ structural (BS) _____	CENTRAL UTILITY SYSTEM GROUP Annual group request? _____ cogeneration (UG) _____ cooling gen./distrib. (UC) _____ electric distrib. (UD) _____ heating gen./distrib. (UH) _____ landfill (UL) _____ water treat./distrib. (UW) _____ waste treatment (US) _____	CODE AND LICENSURE CORRECTION GROUPS Licensure (LC) _____ Annual request? _____ Life Safety _____ Annual request? _____ Handicapped (LH) _____ Annual request? _____ Environmental (LE) _____ Annual request? _____	SPECIAL SYSTEM GROUP Annual group request? _____ energy conservation (SC) _____ storage tanks (BX) _____	CAMPUS SYSTEM GROUP Annual group request? _____ drainage/grounds (CG) _____ road system paving (CR) _____ other paving (CP) _____	
BUILDING SYSTEM GROUP Annual group request? _____ electrical (BE) _____ envelope (BX) _____ interior (BI) _____ mechanical (BM) _____ plumbing (BP) _____ roof (BR) _____ site (BG) _____ special (BD) _____ structural (BS) _____	CENTRAL UTILITY SYSTEM GROUP Annual group request? _____ cogeneration (UG) _____ cooling gen./distrib. (UC) _____ electric distrib. (UD) _____ heating gen./distrib. (UH) _____ landfill (UL) _____ water treat./distrib. (UW) _____ waste treatment (US) _____	CODE AND LICENSURE CORRECTION GROUPS Licensure (LC) _____ Annual request? _____ Life Safety _____ Annual request? _____ Handicapped (LH) _____ Annual request? _____ Environmental (LE) _____ Annual request? _____							
SPECIAL SYSTEM GROUP Annual group request? _____ energy conservation (SC) _____ storage tanks (BX) _____	CAMPUS SYSTEM GROUP Annual group request? _____ drainage/grounds (CG) _____ road system paving (CR) _____ other paving (CP) _____								
<p><i>NOTE: If at least three systems or at least two groups are to be repaired in a single project, it is a MAJOR REPAIR and Part D should be used. If three or more systems in a facility group are being repaired in separate projects within <u>one group's</u> general capital renewal request, it is NOT a MAJOR REPAIR and you will answer YES to "annual request" and complete Parts B and C.</i></p>									
PART B: PROJECTED FINANCE PLAN FOR FACILITY GROUP REPAIRS, AND SPECIFIED CODE AND LICENSURE CORRECTIONS:									
Group/System	Fund Code	FY 2019-20	FY 2020-21						
FY 2021-22	FY 2022-23	FY 2023-24							
TOTAL									

CIP-5: Service-Level Capital Renewal Projects

PART C: SCHEDULE OF FACILITY GROUP REPAIRS, OR SPECIFIED CODE AND LICENSURE CORRECTIONS, AND COMPONENT FINANCING:

Project Description	DMS Bldg.#	Critical Routine	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24

PART D: SCHEDULE OF MAJOR REPAIRS AND COMPONENT FINANCING:

BUILDING / FACILITY IDENTIFICATION / DESCRIPTION

DMS BLDG NO. _____ ADDRESS / LOCATION _____ COUNTY _____

LRPP NARRATIVE PAGE ON WHICH PROJECT IS DESCRIBED _____

Schedule of Project Components (Component/Fund Code)	Estimated Expenditures				
	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24

Total: All Costs by Fund Code					
Fund Code	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24
TOTAL					

CIP-5: Service-Level Capital Renewal Projects

PART E: COST EFFICIENCIES ANTICIPATED FROM MAJOR REPAIRS:						
Incremental Facility Maintenance Costs	Fund Code	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24
Salaries & Benefits	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
OPS	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Expenses	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Other (specify)	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Fund Totals	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____
Incremental Utility Costs						
Other (specify)	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____