



FLORIDA DEPARTMENT *of* STATE

CIP-5
Capital Renewal Projects

CIP-5: Service-Level Capital Renewal Projects

Agency:	Department of State	LAS/PBS Budget Entity Code:	45200700
Service:	Not Applicable	Appropriation Category Code:	140020
Project Title:	Lead-Based Paint Abatement at the Department of State Historic Sites	Agency Priority:	002
		LRPP Narrative Page:	N/A
To be constructed by: Contract <input checked="" type="checkbox"/> Force account <input type="checkbox"/>			
Level of Aggregation:			
<input checked="" 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.)			Yes
Critical Need? (Y/N) (If Yes, all funding must be requested in the first two fiscal years.)			Yes
PART A: SYSTEM IDENTIFICATION			
BUILDING SYSTEM GROUP		CENTRAL UTILITY SYSTEM GROUP	
Annual group request? <u>No</u>		Annual group request? <u>No</u>	
electrical (BE) _____	envelope (BX) <u>X</u>	cogeneration (UG) _____	cooling gen./distrib. (UC) _____
interior (BI) <u>X</u>	mechanical (BM) _____	electric distrib. (UD) _____	heating gen./distrib. (UH) _____
plumbing (BP) _____	roof (BR) _____	landfill (UL) _____	water treat./distrib. (UW) _____
site (BG) _____	special (BD) <u>X</u>	waste treatment (US) _____	
structural (BS) _____			
SPECIAL SYSTEM GROUP		CAMPUS SYSTEM GROUP	
Annual group request? <u>No</u>		Annual group request? <u>No</u>	
energy conservation (SC) _____	storage tanks (BX) _____	drainage/grounds (CG) _____	road system paving (CR) _____
		other paving (CP) _____	
CODE AND LICENSURE CORRECTION GROUPS			
Licensure (LC) _____			
Annual request? _____			
Life Safety (LS) <u>X</u>			
Annual request? <u>No</u>			
Handicapped (LH) <u>X</u>			
Annual request? _____			
Environmental (LE) <u>X</u>			
Annual request? <u>No</u>			
<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>			
PART B: PROJECTED FINANCE PLAN FOR FACILITY GROUP REPAIRS, AND SPECIFIED CODE AND LICENSURE CORRECTIONS:			
Group/System	Fund Code	FY 2024-25	FY 2025-26
		\$ 7,086,600	
TOTAL		\$ 7,086,600	

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 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29

PART D: SCHEDULE OF MAJOR REPAIRS AND COMPONENT FINANCING:

BUILDING / FACILITY IDENTIFICATION / DESCRIPTION
 DMS BLDG NO. _____ ADDRESS / LOCATION Various DOS Management Historic Properties COUNTY Leon
 LRPP NARRATIVE PAGE ON WHICH PROJECT IS DESCRIBED _____

Schedule of Project Components (Component/Fund Code)	Estimated Expenditures				
	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29
Construction Costs	\$ 7,086,600	_____	_____	_____	_____
Fees and Permit Costs/Inspections	_____	_____	_____	_____	_____
Other Costs	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

Total: All Costs by Fund Code					
Fund Code	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
TOTAL	\$ 7,086,600	_____	_____	_____	_____

CIP-5: Service-Level Capital Renewal Projects

PART E: COST EFFICIENCIES ANTICIPATED FROM MAJOR REPAIRS:						
Incremental Facility Maintenance Costs	Fund Code	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29
Salaries & Benefits	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
OPS	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Expenses	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Other (specify)	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Fund Totals	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	\$ 7,086,600	_____	_____	_____	_____
<hr style="border-top: 1px dashed black;"/>						
Incremental Utility Costs						
Other (specify)	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____

CIP-5: Service-Level Capital Renewal Projects

Agency:	Department of State	LAS/PBS Budget Entity Code:	45200700						
Service:	Not Applicable	Appropriation Category Code:	083045						
Project Title:	The Grove - Burr Cottage Access Improvements	Agency Priority:	003						
		LRPP Narrative Page:	N/A						
To be constructed by: Contract <input checked="" type="checkbox"/> Force account <input type="checkbox"/>									
Level of Aggregation:									
<input checked="" type="checkbox"/> Service <input type="checkbox"/> Institution/Campus (SUS/SBCC only): _____ <div style="text-align: center; font-size: small;">NAME</div>									
Major Repair Project? (Y/N) (If Yes, complete Parts A, D & E; if No, complete Parts A, B & C.)			Yes						
Critical Need? (Y/N) (If Yes, all funding must be requested in the first two fiscal years.)			No						
PART A: SYSTEM IDENTIFICATION									
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> BUILDING SYSTEM GROUP Annual group request? <u>No</u> electrical (BE) <input checked="" type="checkbox"/> envelope (BX) _____ interior (BI) _____ mechanical (BM) _____ plumbing (BP) _____ roof (BR) _____ site (BG) <input checked="" type="checkbox"/> special (BD) _____ structural (BS) _____ </td> <td style="width: 33%; vertical-align: top;"> CENTRAL UTILITY SYSTEM GROUP Annual group request? <u>No</u> cogeneration (UG) _____ cooling gen./distrib. (UC) _____ electric distrib. (UD) <input checked="" type="checkbox"/> 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 (LS) _____ Annual request? <u>No</u> Handicapped (LH) <input checked="" type="checkbox"/> Annual request? _____ Environmental (LE) <input checked="" type="checkbox"/> Annual request? <u>No</u> </td> </tr> <tr> <td style="vertical-align: top;"> SPECIAL SYSTEM GROUP Annual group request? <u>No</u> energy conservation (SC) _____ storage tanks (BX) _____ </td> <td style="vertical-align: top;"> CAMPUS SYSTEM GROUP Annual group request? <u>No</u> drainage/grounds (CG) <input checked="" type="checkbox"/> road system paving (CR) <input checked="" type="checkbox"/> other paving (CP) <input checked="" type="checkbox"/> </td> <td></td> </tr> </table>				BUILDING SYSTEM GROUP Annual group request? <u>No</u> electrical (BE) <input checked="" type="checkbox"/> envelope (BX) _____ interior (BI) _____ mechanical (BM) _____ plumbing (BP) _____ roof (BR) _____ site (BG) <input checked="" type="checkbox"/> special (BD) _____ structural (BS) _____	CENTRAL UTILITY SYSTEM GROUP Annual group request? <u>No</u> cogeneration (UG) _____ cooling gen./distrib. (UC) _____ electric distrib. (UD) <input checked="" type="checkbox"/> heating gen./distrib. (UH) _____ landfill (UL) _____ water treat./distrib. (UW) _____ waste treatment (US) _____	CODE AND LICENSURE CORRECTION GROUPS Licensure (LC) _____ Annual request? _____ Life Safety (LS) _____ Annual request? <u>No</u> Handicapped (LH) <input checked="" type="checkbox"/> Annual request? _____ Environmental (LE) <input checked="" type="checkbox"/> Annual request? <u>No</u>	SPECIAL SYSTEM GROUP Annual group request? <u>No</u> energy conservation (SC) _____ storage tanks (BX) _____	CAMPUS SYSTEM GROUP Annual group request? <u>No</u> drainage/grounds (CG) <input checked="" type="checkbox"/> road system paving (CR) <input checked="" type="checkbox"/> other paving (CP) <input checked="" type="checkbox"/>	
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PART B: PROJECTED FINANCE PLAN FOR FACILITY GROUP REPAIRS, AND SPECIFIED CODE AND LICENSURE CORRECTIONS:									
Group/System	Fund Code	FY 2024-25	FY 2025-26						
		FY 2026-27	FY 2027-28						
		FY 2028-29							
		\$ 120,392							
TOTAL		\$ 120,392							

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

Project Description	DMS Bldg.#	Critical Routine	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29

PART D: SCHEDULE OF MAJOR REPAIRS AND COMPONENT FINANCING:

BUILDING / FACILITY IDENTIFICATION / DESCRIPTION

DMS BLDG NO. _____ ADDRESS / LOCATION 105 West 3rd Ave, Tallahassee, FL 32303 COUNTY Leon

LRPP NARRATIVE PAGE ON WHICH PROJECT IS DESCRIBED _____

Schedule of Project Components (Component/Fund Code)	Estimated Expenditures				
	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29
Construction Costs, Design	\$ 120,392	_____	_____	_____	_____
Fees and Permit Costs/Inspections	_____	_____	_____	_____	_____
Other Costs	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

Total: All Costs by Fund Code						
	Fund Code	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	\$ 120,392	_____	_____	_____	_____

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PART E: COST EFFICIENCIES ANTICIPATED FROM MAJOR REPAIRS:						
Incremental Facility Maintenance Costs	Fund Code	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	FY 2028-29
Salaries & Benefits						
	SUBTOTAL					
OPS						
	SUBTOTAL					
Expenses						
	SUBTOTAL					
Other (specify)						
	SUBTOTAL					
Fund Totals						
	TOTAL	N/A				
Incremental Utility Costs						
Other (specify)						
	TOTAL					