



CIP-3

Five-Year New Construction and Non-Structural CIP Plan

CIP-3: Short-Term Project Explanation

| | | | |
|---|--|-----------------------------|---------------------------------|
| Agency: | Agency for Health Care Administration | Agency Priority: | N/A |
| Budget Entity and Budget Entity Code: | Administration and Support 6820000000 | Project Category: | N/A |
| Appropriation Category Code: | | LRPP Narrative Page: | |
| PROJECT TITLE: | | | |
| Statutory Authority: | | | |
| To be Constructed by: | Contract? (Y/N) | YES NO | Force Acct.? (Y/N) |
| | | | YES NO |
| Facility Type | Service Load | Planned Used Factor | User Stations Required |
| | | | |
| | | | |
| Geographic Location: | | | |
| County: | | | |
| Facility Type | Net Area (square feet) | Efficiency Factor | Gross Area (square feet) |
| | | | |
| | | | |
| Schedule of Project Components | FY 2012-13 | FY 2013-14 | FY 2014-15 |
| 1. Basic Construction Costs | \$ | \$ | \$ |
| a. Construction Cost | | | |
| b. Permits, Inspections, Impact Fees | | | |
| c. Communication requirements (conduits, wiring, etc.) | | | |
| d. Utilities outside building | | | |
| e. Site Development (roads, paving, etc.) | | | |
| f. Energy efficient equipment | | | |
| g. Art allowance (Section 255.043, Florida Statutes) | | | |
| h. Other | | | |
| Subtotal: | \$ | \$ | \$ |

CIP-3: Short-Term Project Explanation

| | | | | | | |
|--|------------------|------------------------------------|-------------------|-------------------|-------------------|-------------------|
| 2. Other Project Costs | | \$ | \$ | \$ | \$ | \$ |
| a. Land/Existing Facility Acquisition | | | | | | |
| b. Professional Services | | | | | | |
| 1) Planning/Programming | | | | | | |
| 2) Architechtrual/Engineering Fees | | | | | | |
| 3) On-site representatives | | | | | | |
| 4) Testing/Surveys | | | | | | |
| 5) Other Professional Services | | | | | | |
| c. Miscellaneous Costs | | | | | | |
| d. Moveable Equipment/Furniture | | | | | | |
| Subtotal: | | | | | | |
| 3. All Costs (1 + 2) | | | | | | |
| 4. DMS Fee | | | | | | |
| Total: All Costs by Fund | | | | | | |
| Fund Code: | | | | | | |
| Fund Code: | | | | | | |
| TOTAL (3 + 4) | | \$ | \$ | \$ | \$ | \$ |
| Appropriations to-date: | | Projected Costs Beyond CIP: | | | | |
| General Revenue | | General Revenue | | | | |
| Trust Funds | | Trust Funds | | | | |
| TOTAL | | TOTAL | | | \$0 | \$0 |
| Changes in Agency Service Costs | | FY 2012-13 | FY 2013-14 | FY 2014-15 | FY 2015-16 | FY 2016-17 |
| Category | Fund Code | \$ | \$ | \$ | \$ | \$ |
| Salaries & Benefits | | | | | | |
| Subtotal | | | | | | |
| OPS | | | | | | |
| Subtotal | | | | | | |
| Expenses | | | | | | |
| Subtotal | | | | | | |
| Other (Specify) | | | | | | |
| Subtotal | | | | | | |
| Fund Totals | | | | | | |
| TOTAL | | \$ | \$ | \$ | \$ | \$ |

CIP-3: Short-Term Project Explanation

| | | | |
|---|---------------------------------------|-----------------------------|---|
| Agency: | Agency for Health Care Administration | Agency Priority: | N/A |
| Budget Entity and Budget Entity Code: | Health Care Services 6850020000 | Project Category: | N/A |
| Appropriation Category Code: | | LRPP Narrative Page: | |
| PROJECT TITLE: | | | |
| Statutory Authority: | | | |
| To be Constructed by: | Contract? (Y/N) | YES NO | Force Acct.? (Y/N) YES NO |
| Facility Type | Service Load | Planned Used Factor | User Stations Required Existing Stations New User Stations Required Space Factor Net Area Required |
| | | | |
| Geographic Location: | | | |
| County: | | | |
| Facility Type | Net Area (square feet) | Efficiency Factor | Gross Area (square feet) Unit Cost Construction Cost Occupancy Date |
| | | | |
| | | | |
| Schedule of Project Components | FY 2012-13 | FY 2013-14 | FY 2014-15 FY 2015-16 FY 2016-17 |
| I. Basic Construction Costs | \$ | \$ | \$ |
| a. Construction Cost | | | |
| b. Permits, Inspections, Impact Fees | | | |
| c. Communication requirements (conduits, wiring, etc.) | | | |
| d. Utilities outside building | | | |
| e. Site Development (roads, paving, etc.) | | | |
| f. Energy efficient equipment | | | |
| g. Art allowance (Section 255.043, Florida Statutes) | | | |
| h. Other | | | |
| Subtotal: | \$ | \$ | \$ |

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| | | | | | | |
|--|------------------|------------------------------------|-------------------|-------------------|-------------------|-------------------|
| 2. Other Project Costs | | \$ | \$ | \$ | \$ | \$ |
| a. Land/Existing Facility Acquisition | | | | | | |
| b. Professional Services | | | | | | |
| 1) Planning/Programming | | | | | | |
| 2) Architechtural/Engineering Fees | | | | | | |
| 3) On-site representatives | | | | | | |
| 4) Testing/Surveys | | | | | | |
| 5) Other Professional Services | | | | | | |
| c. Miscellaneous Costs | | | | | | |
| d. Moveable Equipment/Furniture | | | | | | |
| Subtotal: | | | | | | |
| 3. All Costs (1 + 2) | | | | | | |
| 4. DMS Fee | | | | | | |
| Total: All Costs by Fund | | | | | | |
| Fund Code: | | | | | | |
| Fund Code: | | | | | | |
| TOTAL (3 + 4) | | \$ | \$ | \$ | \$ | \$ |
| Appropriations to-date: | | Projected Costs Beyond CIP: | | | | |
| General Revenue | | General Revenue | | | | |
| Trust Funds | | Trust Funds | | | | |
| TOTAL | | TOTAL | | | \$0 | \$0 |
| Changes in Agency Service Costs | | FY 2012-13 | FY 2013-14 | FY 2014-15 | FY 2015-16 | FY 2016-17 |
| Category | Fund Code | \$ | \$ | \$ | \$ | \$ |
| Salaries & Benefits | | | | | | |
| Subtotal | | | | | | |
| OPS | | | | | | |
| Subtotal | | | | | | |
| Expenses | | | | | | |
| Subtotal | | | | | | |
| Other (Specify) | | | | | | |
| Subtotal | | | | | | |
| Fund Totals | | | | | | |
| TOTAL | | \$ | \$ | \$ | \$ | \$ |

CIP-3: Short-Term Project Explanation

| | | | |
|---|---------------------------------------|-----------------------------|-----------------------------------|
| Agency: | Agency for Health Care Administration | Agency Priority: | N/A |
| Budget Entity and Budget Entity Code: | Health Care Regulation 6870070000 | Project Category: | N/A |
| Appropriation Category Code: | | LRPP Narrative Page: | |
| PROJECT TITLE: | | | |
| Statutory Authority: | | | |
| To be Constructed by: | Contract? (Y/N) | YES NO | Force Acct.? (Y/N) |
| | | | YES NO |
| Facility Type | Service Load | Planned Used Factor | User Stations Required |
| | | | Existing Stations |
| | | | New User Stations Required |
| | | | Space Factor |
| | | | Net Area Required |
| Geographic Location: | | | |
| County: | | | |
| Facility Type | Net Area (square feet) | Efficiency Factor | Gross Area (square feet) |
| | | | Unit Cost |
| | | | Construction Cost |
| | | | Occupancy Date |
| | | | |
| Schedule of Project Components | FY 2012-13 | FY 2013-14 | FY 2014-15 |
| I. Basic Construction Costs | \$ | \$ | \$ |
| a. Construction Cost | | | |
| b. Permits, Inspections, Impact Fees | | | |
| c. Communication requirements (conduits, wiring, etc.) | | | |
| d. Utilities outside building | | | |
| e. Site Development (roads, paving, etc.) | | | |
| f. Energy efficient equipment | | | |
| g. Art allowance (Section 255.043, Florida Statutes) | | | |
| h. Other | | | |
| Subtotal: | \$ | \$ | \$ |
| | | | \$ |

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CIP-3: Short-Term Project Explanation

| | | | | | | |
|--|------------------|------------------------------------|-------------------|-------------------|-------------------|-------------------|
| 2. Other Project Costs | | \$ | \$ | \$ | \$ | \$ |
| a. Land/Existing Facility Acquisition | | | | | | |
| b. Professional Services | | | | | | |
| 1) Planning/Programming | | | | | | |
| 2) Architectural/Engineering Fees | | | | | | |
| 3) On-site representatives | | | | | | |
| 4) Testing/Surveys | | | | | | |
| 5) Other Professional Services | | | | | | |
| c. Miscellaneous Costs | | | | | | |
| d. Moveable Equipment/Furniture | | | | | | |
| Subtotal: | | | | | | |
| 3. All Costs (1 + 2) | | | | | | |
| 4. DMS Fee | | | | | | |
| Total: All Costs by Fund | | | | | | |
| Fund Code: | | | | | | |
| Fund Code: | | | | | | |
| TOTAL (3 + 4) | | \$ | \$ | \$ | \$ | \$ |
| Appropriations to-date: | | Projected Costs Beyond CIP: | | | | |
| General Revenue | | General Revenue | | | | |
| Trust Funds | | Trust Funds | | | | |
| TOTAL | | TOTAL | | | \$0 | \$0 |
| Changes in Agency Service Costs | | FY 2012-13 | FY 2013-14 | FY 2014-15 | FY 2015-16 | FY 2016-17 |
| Category | Fund Code | \$ | \$ | \$ | \$ | \$ |
| Salaries & Benefits | | | | | | |
| Subtotal | | | | | | |
| OPS | | | | | | |
| Subtotal | | | | | | |
| Expenses | | | | | | |
| Subtotal | | | | | | |
| Other (Specify) | | | | | | |
| Subtotal | | | | | | |
| Fund Totals | | | | | | |
| TOTAL | | \$ | \$ | \$ | \$ | \$ |

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