



Maintenance Plan

CIP-4: Service-Level Operational Maintenance Budget

Agency:	Department of Elder Affairs					
Service:	Not Applicable					
Square Feet						
Managed	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18
<i>(NOTE: For FY 2012-13, enter the total square feet for facilities managed by your agency as indicated in the most recent Facilities Inventory of the Department of Management Services. In each subsequent year, add to this total all new square feet requested by that time.)</i>						
EXISTING FACILITIES (All square feet listed above for FY 2012-13):						
Preventive Maintenance:						
	Fund Code	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18
Salaries & Benefits	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
OPS	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Expenses	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Other (specify)	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Fund Totals	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____
General Maintenance:						
	Fund Code	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18
Salaries & Benefits	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
OPS	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____

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Routine Operating Costs					
Fund Code	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18
Salaries & Benefits					
SUBTOTAL					
OPS					
SUBTOTAL					
Expenses					
SUBTOTAL					
Other (specify)					
SUBTOTAL					
Fund Totals					
TOTAL					

CIP-5: Service-Level Capital Renewal Projects

Agency:	Department of Elder Affairs	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.)						
Critical Need? (Y/N) (If Yes, all funding must be requested in the first two fiscal years.)						
PART A: SYSTEM IDENTIFICATION						
BUILDING SYSTEM GROUP		CENTRAL UTILITY SYSTEM GROUP				
Annual group request? _____		Annual group request? _____				
electrical (BE) _____	envelope (BX) _____	cogeneration (UG) _____	cooling gen./distrib. (UC) _____			
interior (BI) _____	mechanical (BM) _____	electric distrib. (UD) _____	heating gen./distrib. (UH) _____			
plumbing (BP) _____	roof (BR) _____	landfill (UL) _____	water treat./distrib. (UW) _____			
site (BG) _____	special (BD) _____	waste treatment (US) _____				
structural (BS) _____						
SPECIAL SYSTEM GROUP		CAMPUS SYSTEM GROUP				
Annual group request? _____		Annual group request? _____				
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) _____ Annual request? _____ Handicapped (LH) _____ Annual request? _____ Environmental (LE) _____ Annual request? _____						
<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 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18
		_____	_____	_____	_____	_____
TOTAL		_____	_____	_____	_____	_____

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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 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18

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 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18

Total: All Costs by Fund Code						
Fund Code	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	
TOTAL						

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PART E: COST EFFICIENCIES ANTICIPATED FROM MAJOR REPAIRS:						
Incremental Facility Maintenance Costs	Fund Code	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18
Salaries & Benefits	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
OPS	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Expenses	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Other (specify)	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	SUBTOTAL	_____	_____	_____	_____	_____
Fund Totals	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____
Incremental Utility Costs						
Other (specify)	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____