



Town of Dunstable

Capital Plan

FY2017-FY2021

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Introduction

Background

In FY 2015, The Board of Selectmen, appointed an ad hoc Capital Planning Committee. This committee, working with the Board of Selectmen and Advisory Board (FinCom), will each year at the start of the budget process prepare a plan to financially forecast large improvement that the Town may need to invest in. At the Town Meeting in May 2016, the Town will be asking to adopt a bylaw to solidify this committee and its process.

Introduction to the Plan

The bylaw proposed to establish the Capital Planning Committee lays out the function of the committee to review the capital requirements of the Town and to make recommendations for Town Meeting approval. These recommendations are compiled in a 5 year CIP that will be updated annually and submitted to the annual Town Meeting.

The plan will include future projects, programs, improvements, and acquisitions having a useful life of at least five years and a cost of at least \$10,000. The Capital Planning Committee will work with the Department Heads as well as the various Town Boards and Commissions to identify these capital items for inclusion in the plan. The Capital Planning Committee will consider the need of each request in relation to the others and the cost of proposed capital expenditures with regard to its effect on the financial position of the Town.

In evaluating and scheduling the requests, the Capital Planning Committee shall consider risks to public safety and health, deterioration of Town facilities, compliance with state and federal requirements, coordination with other capital requests, improvement of efficiency, systematic replacement, protection and conservation of resources, and maintenance of the level of service.

Plan Components

- Each capital item to be included in the plan begins with a request form. The form, as you will see in the ensuing pages, is headed by basic project information. In some cases the description and/or justification for the capital item are provided on separate pages.
- There are the criteria by which the project will be evaluated to determine its priority with respect to other requests. There are five such evaluative criteria which ask the following: is there another means to satisfy the need, does the item improve the level of service provided by the municipality, is the item a legal or regulatory requirement, is there an impact to the recurring operating budget, and is the project ready for implementation.

- A schedule of expenditure must be prepared. This includes prior year costs on various aspects that may be present for a given project. Not every project will require all of the elements. This section provides the public an accurate picture of the entirety of the cost of a project from conception to implementation.
- There is a section detailing the impact to the operational budget, alluded to earlier. Here the Committee is looking to see if the capital item will generate revenue, impact personnel, or impact operating costs.
- The funding source must also be determined. This can range from borrowing to operational budgets, a description of which follows.

Funding Sources

Debt Financing

Debt financing is common in cities and towns. As with buying a house, a well-managed debt plan can allow one to buy large items (e.g. a house) when a purchase of that magnitude would not necessarily fit into a single year's annual budget. Debt projects would be ones such as:

- Land acquisition
- Park improvements
- Information technology upgrades
- Public building improvements
- Street repaving

The Town Meeting authorizes the municipality to raise revenue for capital improvements. Interest rates on bond payments are based on market conditions and the Town bond rating, as determined by private rating agencies. The Town uses two different types of financial instruments when it debt finances any project. These instruments are General Obligation (GO) Bonds and Bond Anticipation Notes (BANs). Both mechanisms are commonly used by municipalities to fund capital project needs.

General Obligation (GO) Bonds and Bond Anticipation Notes (BANs)

GO bonds are long-term debt instruments that cities and towns may use to fund large projects. Funds are obtained through the sale of these instruments in the bond market. GO bonds are backed by the full faith and credit of the Town of Dunstable. As such, investors are guaranteed the Town will pay its obligation through the Town's taxes. Typically, bonds run for a period of twenty years. Bond Anticipation Notes (BANs) are short-term financing instruments the Town utilizes to borrow funds while projects are ongoing, or shortly

thereafter. Generally, the Town pays only the interest on these funds, which runs around 2 percent or lower. BANs are usually utilized for one to two year periods.

Grants

The Town will seek to reduce bond funds wherever possible by looking to grants for projects such as fire engine replacements, the rehabilitation of roads, and energy efficiency projects. One source of grants is from other levels of government, for example the Environmental Protection Agency, MA Department of Health and Human Services, U.S. Housing and Urban Development, MA Department of Environmental Services, and the Department of Transportation. Generally, these Federal and State sources provide an outright grant or matching funds to go with locally raised funds. The Town will also pursue non-governmental private grants when applicable.

One-Time Revenue

One time revenue is not a good funding source for the Town's annual operating budget because operating costs recur year-to-year. In year two of any scenario, use of one time revenue leads to either budget cuts or increased reliance on property taxes. However, one-time revenue is an excellent funding source for capital projects. This would both reduce reliance on bond financing and eliminate potential future impacts on property taxes. In order to limit the long-term costs associated with the CIP, one-time revenue will be used wherever possible in lieu of debt financing.

General Fund Revenue

The Town's General Fund Budget will ultimately pay a portion of the annual debt costs associated with this project. The Town has made substantial reductions in expenses in the past. These reductions make it very difficult to procure large, needed capital improvements. It should be noted that general fund expenditures can reduce the need for future capital improvement projects. For example, funding for custodial and maintenance staff reduces the need for major building renovations necessitated by unaddressed building issues. Vehicle maintenance staff can, and has, substantially prolonged the life of Town vehicles. Proper funding of these program areas is essential in the preservation of Town assets. In addition, some items that would aid in this maintenance, and are too small in value to be considered a true capital improvement, should be paid for from the Town's annual budget. For example, custodial and maintenance equipment that aids in facility upkeep would fall under this category. Regular software updates also reduce the need for major file conversion projects that can occur when systems are out of date.

Community Preservation Committee

The Community Preservation Act (CPA) is a funding tool that helps communities preserve open space and historic sites, create affordable housing, and develop outdoor recreational facilities. CPA allows communities to create a local fund for open space protection, historic preservation, affordable housing and outdoor recreation. CPA funds are raised locally through a surcharge of 3% of the tax levy against real property.

Projects are only eligible for CPA funding if they fit in a **green** box below.

| | Open Space | Historic | Recreation | Housing |
|------------------------------------|--|----------|--------------------|--|
| Acquire | Yes | Yes | Yes | Yes |
| Create | Yes | No | Yes | Yes |
| Preserve | Yes | Yes | Yes | Yes |
| Support | No | No | No | Yes |
| Rehabilitate and/or Restore | Yes, if acquired or created with CPA funds | Yes | Yes (new 7/8/2012) | Yes, if acquired or created with CPA funds |

*Chart adapted from "Recent Developments in Municipal Law", Massachusetts Department of Revenue, October 2012.
<http://www.communitypreservation.org/content/chart-allowable-uses>*

Some of the Town of Dunstable CPA projects to date include:

- Ferrari Farm - "Purchase of Ferrari Farm, a ""keystone"" parcel containing five existing protected areas.
- Blanchard Hill Clearing and Stone Arched Bridge "Creation of a Picnic Area and scenic vista. Preservation of Historic Stone Arched Bridge through the creation of emergency access for police/fire vehicles.
- National Register Project "To finalize Town Center Historic District Project.
- Union School windows "To supplement cost of replacement windows in order to upgrade to use of historically accurate replacement windows.
- McGovern's Farm Wall"Additional Engineering costs to preserve and enhance the Historic nature of the retainer wall on Rt 113.
- Central Cemetery monuments restoration "18th and 19th century monuments of Central Cemetery restoration and repair.
- Town Records Preservation Project "This project will fund the preservation of Town Records, specifically to disband, clean, de-acidify, repair, and rebind Town Vital Records, Town Meeting Records, and Selectmen's Records for 18th, 19th and 20th Centuries. Records will be scanned, microfilmed and digitized.

Glossary of Terms

Capital Improvement Plan (CIP): The document setting forth in both dollars and narrative form the recommended and proposed capital projects the Town should be undertaking over the ensuing five-year period.

Capital Improvement: A project, undertaking or acquisition having a cost (either singularly or in aggregate) of \$10,000 or more and a useful life of (5) years or more.

Capital Planning Committee: The three (3) member committee, appointed by the Board of Selectmen, charged with the responsibility for developing the CIP.

Project Description: A title and/or narrative of moderate length describing in greater detail what is entailed in the proposed undertaking including background information on the need/rational for the proposal.

Prior Year Costs: Certain Projects identified in the five-year plan which have, either because of earlier initiation or planning action on the part of the Town, a prior year's costs associated with them. Where such was applicable, the prior year's cost (s) already incurred by the Town have been identified.

Plan Years: The five-year period represented by the Plan is July 1, 2016 through June 30, 2020.

Funding Source: The proposed method or means for funding the CIP item listed as recommended by the committee.

Operating Cost: The Committee's best estimate of the annual operating cost to be associated with a particular CIP item proposed to be carried out.

Engineering (Feasibility) Study: Certain Projects, while identified in the plan require more detailed professional examination upon which to make informed decisions. In such instances, the Committee has identified funding for such as an initial or preparatory step to be carried out before final recommendation/decisions are made on proposed funding for the entire undertaking.

Design: As the description would indicate, design is utilized in the plan to identify the step the Committee is proposing to be followed next for a particular project, i.e. the next step necessary to be in a position to actually go to bid and/or construction on the undertaking.

Total Cost: The total estimated cost to bring to completion a proposed CIP item including any prior year costs incurred in applicable.

Administration



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
FY 17- FY 21 (5 years)

Project Info:

Project Title Building Evaluations Included in Prior 5 year Capital Plan Y N
 Project Sponsor Town Administrator Contact Name Tracey Hutton
 Approving Body Board of Selectmen Date of Vote _____

PROJECT DESCRIPTION Town building evaluations.

PROJECT JUSTIFICATION Building evaluations of town buildings for tasks and pricing for future Capital Plans.

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

| Expenditure Schedule (in \$k): | | | | | | | | |
|--------------------------------|------------|------|------|------|------|------|-------|----------|
| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
| Planning and Design | | \$10 | | | | | \$10 | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | | | | \$ | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$10 | \$ | \$ | \$ | \$ | \$10 | |

| Operational Budget Impact: | | | |
|--|--------------------------|-------------------------------------|-------------------------|
| | YES | NO | If Yes, Provide Details |
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

| Funding Sources: | | | |
|--|-------------------------------------|--------------------------|-------------------------|
| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
| Borrowing/Cash Capital | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Town Hall Building Evaluation Included in Prior 5 year Capital Plan Y N
 Project Sponsor Administration Contact Name Tracey Hutton
 Approving Body Board of Selectmen Date of Vote N/A

PROJECT DESCRIPTION Complete an architectural evaluation of historic Town Hall which will include an outline, photos, and budgeting.

PROJECT JUSTIFICATION Since the renovation over a decade ago, little has been done to maintain the facilities. As a result there are many capital items that need attention; it is important to know what they are and what their potential cost to the community is for future plans.

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

| Expenditure Schedule (in \$k): | | | | | | | | |
|--------------------------------|------------|------|------|------|------|------|-------|------------------------|
| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
| Planning and Design | | \$4 | | | | | \$4 | Architectural Analysis |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | | | | \$ | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$4 | \$ | \$ | \$ | \$ | \$4 | |

| Operational Budget Impact: | | | |
|--|--------------------------|-------------------------------------|-------------------------|
| | YES | NO | If Yes, Provide Details |
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

| Funding Sources: | | | |
|--|-------------------------------------|--------------------------|---------------------------------|
| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Request for 2017 funding 4/7/16 |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
FY 17- FY 21 (5 years)

Project Info:

Project Title Voting Equipment Included in Prior 5 year Capital Plan Y N
 Project Sponsor Town Clerk Contact Name Carol Skerrett
 Approving Body Select Board Date of Vote _____

PROJECT DESCRIPTION SEE ATTACHED SHEET

PROJECT JUSTIFICATION SEE ATTACHED SHEET

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | \$10 | | | | \$10 | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | | | | \$ | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$10 | \$ | \$ | \$ | \$10 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|-------------------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |

Project Description

Town voting equipment is outdated and needs replacement. The new voting equipment approved by the Commonwealth is thermal imaging equipment.

Having function approved voting equipment is of paramount importance for town government. Our voting equipment 15 years old. We have no backup. The equipment we now use (Accuvote) is no longer manufactured and parts are going to be harder to come by.

Police



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Speed Trailer Included in Prior 5 year Capital Plan Y N
 Project Sponsor Police Department Contact Name Chief Downes
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Procure new speed trailer

PROJECT JUSTIFICATION Public Safety

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact - <i>NONE</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | \$17 | | | | \$17 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$17 | \$ | \$ | \$ | \$17 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Computers Included in Prior 5 year Capital Plan Y N
 Project Sponsor Police Department Contact Name Chief Downes
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Procure laptops and server for police station

PROJECT JUSTIFICATION Obsolescence of current computers

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | \$10 | | | | \$10 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$10 | \$ | \$ | \$ | \$10 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
FY 17- FY 21 (5 years)

Project Info:

Project Title Replace aging mechanical systems Included in Prior 5 year Capital Plan Y N
 Project Sponsor Police Department Contact Name Chief Downes
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Replace HVAC, AC, Generator

PROJECT JUSTIFICATION These mechanical systems will have reached their expected lifetime

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | | \$25 | | \$25 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$ | \$ | \$25 | \$ | \$25 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Parking lot repaving Included in Prior 5 year Capital Plan Y N
 Project Sponsor Police Department Contact Name Chief Downes
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Repave police station parking lot

PROJECT JUSTIFICATION Surface weathered, crack forming, lines faded

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | \$20 | | | | \$20 | |
| Equipment | | | | | | | \$ | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$20 | \$ | \$ | \$ | \$20 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Replace police vests and helmets Included in Prior 5 year Capital Plan Y N
 Project Sponsor Police Department Contact Name Chief Downes
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Replace vests and helmets worn by police officers

PROJECT JUSTIFICATION Vests and helmets will have reached their expected lifetime

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | | \$10 | | \$10 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$ | \$ | \$10 | \$ | \$10 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Roof for police station Included in Prior 5 year Capital Plan Y N
 Project Sponsor Police Department Contact Name Chief Downes
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Replace police station roof

PROJECT JUSTIFICATION Roof will reach specified lifetime

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | \$20 | | | \$20 | |
| Equipment | | | | | | | \$ | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$ | \$20 | \$ | \$ | \$20 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Cruiser laptops Included in Prior 5 year Capital Plan Y N
 Project Sponsor Police Department Contact Name Chief Downes
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Replace laptops in cruisers

PROJECT JUSTIFICATION Obsolescence of existing laptops

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | \$20 | | | \$20 | |
| Equipment | | | | | | | \$ | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$ | \$20 | \$ | \$ | \$20 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |

Fire



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
FY 17- FY 21 (5 years)

Project Info:

Project Title Engine #2 Replacement Included in Prior 5 year Capital Plan Y N
 Project Sponsor Fire Department Contact Name Chief Rich
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Procure replacement

PROJECT JUSTIFICATION Public Safety (See Attached Document)

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact - <i>NONE</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|-------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | \$325 | | | | \$325 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$325 | \$ | \$ | \$ | \$325 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



**OFFICE OF THE FIRE CHIEF
TOWN OF DUNSTABLE
BRIAN C. RICH
P.O Box 96
DUNSTABLE, MA 01827**

**TEL: (978) 649-6661
FAX: (978) 649-6072
Firedept@dunstable-ma.gov**

2016 (FY2017) Plan would be to replace Engine 2 from structural firefighting duties but to keep as a forest fire vehicle. Estimated Cost \$300,000 - \$325,000

Deficiencies

Pump Size- Engine 2 has a 750 GPM pump which is inadequate for our large diameter hose and in reduces the capabilities of other trucks when it is being used in a relay or water supply. Needs to be a minimum of a 1250 pump.

Seating- a 3 person bench seat but no room while wearing gear. Also no self-contained breathing apparatus in seat which delays response during structure fires. Need seating for 4 to 6 with 3 - 5 scba seats.

Equipment Storage- Truck was not designed to carry all the equipment of a modern structure fire truck and if the forestry equipment was removed, it would impact our forest firefighting abilities.

Reliability- Due to the age of the truck its reliability is becoming a factor. In 2013 it failed its yearly pump test, but passed shortly after some minor repairs.

Engine 2 is our backup engine for engine 6 and is our 2nd due engine for all structure fires. Do to pump size and equipment it carries when engine 6 is out of service, at another call or out of town on a mutual aid call our capabilities are greatly reduced. Which increases the chance of injury to residents and members of our department and affects the extinguishment of fires.

Engine 2 does not carry key equipment due to limited space including a thermal imaging camera, and a 4 gas meter for detecting flammable gases and carbon monoxide and other vital tools needed to safely extinguish fires. All so do to space we are unable to keep items like hand lights and portable radios on chargers keeping them fully charged for use.



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
FY 17- FY 21 (5 years)

Project Info:

Project Title Off Road Vehicle Included in Prior 5 year Capital Plan Y N
 Project Sponsor Fire Department Contact Name Chief Rich
 Approving Body Selectman Date of Vote _____
 PROJECT DESCRIPTION Procure Polaris Off Road Vehicle for fire fighting and rescue (includes all equipment for fire and rescue)

PROJECT JUSTIFICATION To gain quick and easier access to remote areas not currently accessible in emergencies (See Attached Document)

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | \$27 | | | | \$27 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$27 | \$ | \$ | \$ | \$27 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



OFFICE OF THE FIRE CHIEF
TOWN OF DUNSTABLE
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P.O Box 96
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Firedept@dunstable-ma.gov

to extinguish the fire. Unfortunately some of these fires are in difficult areas and don't always allow us to get close enough for full extinguishment. Having a smaller off road vehicle to allow us to extinguish and patrol these areas will benefit us immensely.

Ending Statement:

This vehicle is not just a one type use, but a multi-purpose vehicle that will serve the public in many ways. This vehicle will allow our fire fighters to be able to search for a lost person in a safe and efficient way. This vehicle will help fire fighters extinguish brush fires safely and fast. This vehicle will help extricate an injured person safely and faster than our current method by foot.



Respectfully Submitted
Chief Brian Rich



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
FY 17- FY 21 (5 years)

Project Info:

Project Title Breathing Apparatus(SCBA) Included in Prior 5 year Capital Plan Y N
 Project Sponsor Fire Department Contact Name Chief Rich
 Approving Body Selectman Date of Vote _____
 PROJECT DESCRIPTION To replace 18 outdated (2002) self Contained Breathing Apparatus units

PROJECT JUSTIFICATION This equipment will be outdated by National Standards (NFPA) in 2018 or 2019 (See attached Document)

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|--------------------------|--------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Operational Budget Impact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|-------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | \$144 | | | \$144 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$ | \$144 | \$ | \$ | \$144 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



OFFICE OF THE FIRE CHIEF
TOWN OF DUNSTABLE
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Firedept@dunstable-ma.gov

E. Replacement of 18 Self Contained Breathing Apparatus (SCBA)

Description

In order for firefighters to access smoke and hazardous environments, they must wear Self Contained Breathing Apparatus (SCBA). This equipment allows the fire fighter to operate in these types of environments for extended periods of time without being overcome. This equipment not only adds protection for the firefighter but allows the firefighter to rescue trapped occupants or isolate hazardous situations. This equipment is extremely important to the firefighter and is a required piece of gear. .

Objective

The department will need to replace 18 Self Contained Breathing Apparatus in FY2019. The total cost for 18 SCBA's could be between \$7,000 - \$8,000 per unit, with a maximum total cost of \$144,000.

Deficiencies

Safety:

In order for this equipment to work properly each year all SCBA's must be maintained and constantly serviced. At the end of its useful life which can range from 10-15 years, the SCBA must be completely replaced. This is not only a national standard but it serves as a safety mechanisms due to the hundreds of parts that make up this equipment. Our current SCBA are 2002 edition which will be considered out dated by national standards (NFPA) in 2018 or 2019 next standard is to be released.

Technology:

Technology changes over the useful life of the current equipment, which allows for safer and more efficient products. Replacing this equipment will make sure the new technological advantages are part of the new units, in turn making it safe for the fire fighter and the community.

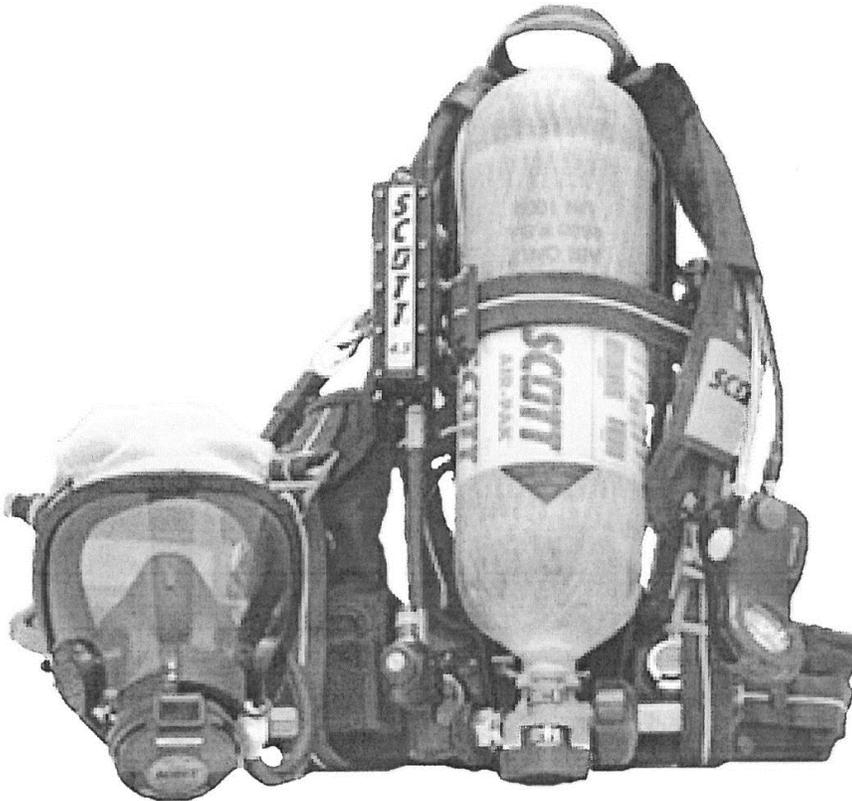
Ending Statement:

This equipment is a necessity for the fire fighter. Without this equipment fire fighters would not be able to perform in the environments that we see. This equipment will need to be updated to meet standards and technology.



OFFICE OF THE FIRE CHIEF
TOWN OF DUNSTABLE
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Respectfully Submitted
Chief Brian Rich

Highway



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title One Ton Dump Truck Replacement Included in Prior 5 year Capital Plan Y N
 Project Sponsor Highway Department Contact Name David Tully
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION One Ton Dump Truck replacement

PROJECT JUSTIFICATION General deterioration

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact - <i>NONE</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | \$65 | | | \$65 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$ | \$65 | \$ | \$ | \$65 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Backhoe Replacement Included in Prior 5 year Capital Plan Y N
 Project Sponsor Highway Department Contact Name David Tully
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Backhoe replacement

PROJECT JUSTIFICATION General deterioration

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact - <i>NONE</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|-------|------|------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | \$110 | | | | \$110 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$110 | \$ | \$ | \$ | \$110 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Loader Replacement Included in Prior 5 year Capital Plan Y N
 Project Sponsor Highway Department Contact Name David Tully
 Approving Body Selectman Date of Vote _____

PROJECT DESCRIPTION Loader replacement

PROJECT JUSTIFICATION General deterioration

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Operational Budget Impact - <i>NONE</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|------|------|------|-------|------|-------|----------|
| Planning and Design | | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | | | | | | \$ | |
| Equipment | | | | | \$169 | | \$169 | |
| Other | | | | | | | \$ | |
| TOTAL | \$ | \$ | \$ | \$ | \$169 | \$ | \$169 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|--------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |

Library



TOWN OF DUNSTABLE
 511 Main Street
 Dunstable, MA 01827
Capital Improvement Program (CIP)
 Capital Appropriation Request
 FY 17- FY 21 (5 years)

Project Info:

Project Title Library Ice and Water Management Remediation Included in Prior 5 year Capital Plan Y N
 Project Sponsor Library Contact Name Mary Beth Pallis
 Approving Body Board of Library Trustees Date of Vote _____

PROJECT DESCRIPTION SEE ATTACHED

PROJECT JUSTIFICATION SEE ATTACHED

Evaluation Criteria:

(Applies to current year budget requests only)

| | Does Not Apply | Does not Meet Criteria | Partially Meets Criteria | Fully Meets Criteria |
|---|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
| No Alternative Means to Satisfy Needs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Maintains or Improves the Level of Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mandated by Legal or Regulatory Requirement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Operational Budget Impact | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Project Feasibility (Readiness) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Expenditure Schedule (in \$k):

| Element | Prior Date | 2017 | 2018 | 2019 | 2020 | 2021 | TOTAL | Comments |
|---------------------|------------|-------|------|------|------|------|----------|----------|
| Planning and Design | \$9.95 | | | | | | \$ | |
| Land | | | | | | | \$ | |
| Construction | | \$150 | | | | | \$150 | |
| Equipment | | | | | | | \$ | |
| Other | | | | | | | \$ | |
| TOTAL | \$9.95 | \$150 | \$ | \$ | \$ | \$ | \$159.95 | |

Operational Budget Impact:

| | YES | NO | If Yes, Provide Details |
|--|--------------------------|-------------------------------------|-------------------------|
| Will this capital request generate new revenue? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>INCREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request <i>DECREASE</i> operating costs? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Will this capital request impact personnel? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Funding Sources:

| How will this Capital Request be paid For? | YES | NO | If Yes, Provide Details |
|--|-------------------------------------|--------------------------|-------------------------|
| Borrowing/Cash Capital | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| CPA Funds | <input type="checkbox"/> | <input type="checkbox"/> | |
| Grants/Gifts | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | <input type="checkbox"/> | |

Project Description: The Dunstable Free Public Library has both water and ice issues that require remediation. Currently, the library has water runoff from the roof that creates ice blocking multiple emergency exits. These need to be clear for safe operation of the library. This projects design and construction aim to remedy this situation to allow the Dunstable Free Public Library to remain open during winter months to benefit the community.

Project Justification: Per fire code, emergency exits need to be clear for the library to remain open. Permanent measures need to be taken order to sure these exits are clear and available for emergency use.

Chart

| Capital Projects Requests | FY 17 | FY 18 | FY 19 | FY 20 | FY 21 | Comments |
|---|------------------|------------------|------------------|------------------|--------------|--|
| Town Clerk | \$0 | \$10,000 | \$0 | \$0 | \$0 | |
| New voting equipment | | \$10,000 | | | | |
| Highway Department | \$0 | \$110,000 | \$65,000 | \$169,000 | \$0 | |
| Backhoe | | \$110,000 | | | | This is the cost today |
| 1 TON DUMP | | | \$65,000 | | | This will replace Ford F550. This is the cost today. |
| Loader | | | | \$169,000 | | This is the cost today |
| Library | \$150,000 | \$0 | \$0 | \$0 | \$0 | |
| Modify exits and landings | \$150,000 | | | | | In the scope of current design work. Amounts to be added |
| Fire | \$0 | \$352,000 | \$144,000 | \$0 | \$0 | |
| Engine #2 Replacement | | \$325,000 | | | | |
| Polaris Off Road Fire Fighting & Rescue | | \$27,000 | | | | |
| Breathing Apparatus(SCBA) | | | \$144,000 | | | |
| Police | \$0 | \$37,000 | \$40,000 | \$10,000 | \$0 | |
| Speed trailer | | \$17,000 | | | | |
| Cruiser laptops | | | \$20,000 | | | \$5000 each, buy 2 every third year |
| Vests and helmets | | | | \$10,000 | | These have a 7 yr life span. |
| Repave parking lot and restripe | | \$20,000 | | | | |
| New Roof | | | \$20,000 | | | Should talk to Building inspector on need. |
| Mechanical System | | | | \$25,000 | | |
| Replace computers | | \$10,000 | | | | |
| Administration | \$4,000 | \$0 | \$0 | \$0 | \$0 | |
| Town Hall Building Evaluation | \$4,000 | | | | | Design Step before capital Improvements |
| Town Building Evaluations | \$10,000 | | | | | Design Step before capital Improvements |

Total \$154,000 \$509,000 \$249,000 \$179,000 \$0