



TOWN OF WAYLAND

41 COCHITUATE ROAD
WAYLAND, MASSACHUSETTS 01778

CAPITAL IMPROVEMENT PROGRAM (CIP) CAPITAL APPROPRIATION REQUEST FY13 - FY17 (FIVE YEARS)

PROJECT INFO:	CEMETERY UPGRADES NORTH CEMETERY <i>Project Title</i>	YES <i>Included in Prior 5 Year Capital Plan? (Y/N)</i>
PROJECT SPONSOR:	Board of Public Works/DPW <i>Sponsor (Advocate) Name</i>	Don Ouellette 358 3872 <i>Contact Information</i>
APPROVING BODY / VOTE:	Board of Public Works Chris Brown douellette@wayland.ma.us <i>Contact Name and Email Address</i>	17-Oct-13 <i>Date and Quantum of Vote (if required)</i>
PROJECT DESCRIPTION:	To improve and expand North cemetery. We will be adding 200 trees, regrading the area, adding a new road network, and new drainage. This work will add approximately 1300 new gravesites.	
PROJECT JUSTIFICATION:	This upgrade has been on the planning stages for 10 years. A preliminary plan was drawn up several years ago. This plan has been updated and is being proposed so that we may continue to offer affordable gravesites in Wayland.	

EVALUATION CRITERIA: (Applies to current year budget requests only)

- A. ALTERNATIVE MEANS TO SATISFY NEEDS
- B. MAINTAINS OR IMPROVES THE STANDARD OF SERVICE
- C. MANDATED BY LEGAL OR REGULATORY REQUIREMENTS
- D. OPERATIONAL BUDGET IMPACT
- E. PROJECT FEASIBILITY, (READINESS)

Does Not Meet or Does Not Apply	Partially Meets Criteria	Fully Meets Criteria
		X
		X
X		
	X	
X		

EXPENDITURE SCHEDULE:

ELEMENT	Prior to Date	2013	2014	2015	2016	2017	TOTAL	Comments
1. PLANNING & DESIGN							\$ -	
2. LAND							\$ -	
3. CONSTRUCTION							\$ -	
4. EQUIPMENT		200,000					\$ 200,000	
5. OTHER							\$ -	
TOTAL	\$ -	\$ 200,000	\$ -	\$ -	\$ -	\$ -	\$ 200,000	

OPERATIONAL BUDGET IMPACT:

	YES	NO	If YES, please provide details.
1. Will this Capital Request generate new revenue?	XXX		At 600/grave site this will generate \$780,000
2. Will this Capital Request increase operating costs?		XXX	
3. Will this Capital Request Decrease operating costs?		XXX	
4. Will this Capital Request impact personnel?		XXX	

FUNDING SOURCES:

How will this Capital Request be paid for?	YES	NO	If YES, please provide details.
1. Borrowing/Cash Capital	XXX		
2. CPA Funds			
3. Grants or Gifts			
4. Other			