



**Town of Sudbury
Capital Improvement Budget Request
FY2018 Form A**

Department/Committee:
Item/Project Name:

Initial Year of Request:	Estimated Total Project Cost:	Estimated Future Savings:¹
Estimated Incremental Costs:²	Staffing Changes:³	
Justification Code:	R or NR:	Priority:
Project Description:		
Justification and Need:		
Benefit:		
Last time this was replaced (i.e., year roof was previously replaced or year vehicle):	Typical Replacement Cycle:	
Alternatives Considered/Reasons for Rejecting Alternatives:		
Consequences of Not Implementing/Delaying Implementation:		
Other Pertinent Background Information (e.g., Quotes, Brochures, Pictures, etc):		

¹ Quantify any future savings if project is implemented (e.g., personnel costs, maintenance, repairs, energy conservation, etc.)

² Quantify any incremental costs anticipated if project is implemented (e.g., future personnel costs, maintenance, repairs, etc.)

³ Quantify staffing changes (up or down) anticipated if project is implemented.