

**2016- 2020 Capital Budget Request Form**

Department Agency Number	580	Contact Name	Victor N. Richard, III						
Department Name	NORD	Contact Number	504.658.3015						
Date		Contact E-Mail	<a href="mailto:vnrichard@nola.gov">vnrichard@nola.gov</a>						
Request #	Department Ranking	Priority Criteria Ranking	Project Name	Project Amount	2016	2017	2018	2019	2020
1	5	123	Annunciation Center/Playground	\$ 912,500.00	\$ 912,500.00	\$ -	\$ -	\$ -	\$ -
2	11	135	City Wide Playground Equipment Replacement	\$ 1,000,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00
3	24	126	Uptown Dog Park	\$ 500,000.00	\$ 500,000.00	\$ -	\$ -	\$ -	\$ -
4	8	141	City Wide HVAC Replacement	\$ 1,000,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00
5	9	135	City Wide Lighting - HML Pavilion	\$ 500,000.00	\$ -	\$ -	\$ 250,000.00	\$ 250,000.00	\$ -
6	15	132	Joe W. Brown Parking and lighting	\$ 1,715,000.00	\$ -	\$ 1,715,000.00	\$ -	\$ -	\$ -
7	16	141	Joe W. Brown Lagoon, ecosystem, and ropes course	\$ 1,700,000.00	\$ 1,000,000.00	\$ 700,000.00	\$ -	\$ -	\$ -
8	14	117	Joe W. Brown Victory Track HML and storage	\$ 300,000.00	\$ 300,000.00	\$ -	\$ -	\$ -	\$ -
9	3	129	Lemann Lafitte Greenway Playground	\$ 2,000,000.00	\$ 2,000,000.00	\$ -	\$ -	\$ -	\$ -
10	22	129	Pontchartrain Park athletics building	\$ 600,000.00	\$ -	\$ -	\$ 600,000.00	\$ -	\$ -
11	13	126	City Wide Fencing	\$ 500,000.00	\$ 250,000.00	\$ 125,000.00	\$ -	\$ -	\$ -
12	12	138	Security Cameras	\$ 1,000,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00
13	19	129	Skelly Rupp Baseball Diamond	\$ 1,500,000.00	\$ -	\$ 750,000.00	\$ 750,000.00	\$ -	\$ -
14	17	126	Werner Playground	\$ 400,000.00	\$ 400,000.00	\$ -	\$ -	\$ -	\$ -
15	1	126	Willie Hall	\$ 2,500,000.00	\$ 2,500,000.00	\$ -	\$ -	\$ -	\$ -
16	20	129	Richard Lee	\$ 5,100,000.00	\$ 500,000.00	\$ 4,600,000.00	\$ -	\$ -	\$ -
17	6	132	Treme Recreation Center Elevator	\$ 400,000.00	\$ 400,000.00	\$ -	\$ -	\$ -	\$ -
18	23	129	Playground	\$ 1,250,000.00	\$ 1,250,000.00	\$ -	\$ -	\$ -	\$ -
19	4	141	St. Bernard Center	\$ 6,600,000.00	\$ 600,000.00	\$ 6,000,000.00	\$ -	\$ -	\$ -
20	25	132	City Wide Skate Park	\$ 250,000.00	\$ 250,000.00	\$ -	\$ -	\$ -	\$ -
21	7	132	Joe W. Brown Bridge	\$ 500,000.00	\$ 500,000.00	\$ -	\$ -	\$ -	\$ -
22	10	129	City Wide Pool Renovations	\$ 1,000,000.00	\$ 400,000.00	\$ 300,000.00	\$ 300,000.00	\$ -	\$ -
23	2	114	McCue Playground	\$ 500,000.00	\$ 500,000.00	\$ -	\$ -	\$ -	\$ -
24	18	114	Odile Davis	\$ 120,000.00	\$ 120,000.00	\$ -	\$ -	\$ -	\$ -
25	21	114	Stallings Gentilly	\$ 500,000.00	\$ 100,000.00	\$ 400,000.00	\$ -	\$ -	\$ -
<b>TOTAL</b>				<b>\$ 32,347,500.00</b>	<b>\$ 13,082,500.00</b>	<b>\$ 15,190,000.00</b>	<b>\$ 2,500,000.00</b>	<b>\$ 850,000.00</b>	<b>\$ 600,000.00</b>

Department Head Signature \_\_\_\_\_ Printed Name \_\_\_\_\_

Date \_\_\_\_\_

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Annunciation Center/Playground	Department Priority Ranking	5
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	800 Race Street.	Council District	B
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repair/replace facility plumbing, hvac; Roof Replacement due to the roof being beyond its life expectancy ; repair/replace stall partitions, replace all ceiling tiles, basketball court restriping, repair/replace bollards, replace facility fencing, & install drinking water fountain.		
Five Year Summary	Renovation of existing facilities to improve safety and user experience at the Annunciation Center & Playground.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 912,500.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. Please note that this facility has not offered recreational programming for the past year, while the space has been used as a temporary NORDC office facility.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Renovated facilities aids constructive programing of youth development.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter	
		2016	\$ 912,500.00
		2017	
		2018	
		2019	
2020			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Annunciation Center/Playground	Department Priority Ranking	Blank
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	3	9	
Economic Development	2	6	
Operating Budget	1	3	
Life Expectancy of Project	3	9	
Percent of Population Served by Projects	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	42	123	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	City Wide Playground Equipment Replacement	Department Priority Ranking	11
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	City Wide Playground Playgrounds	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Remove/Replace play equipment, slab, seating area, landscaping and shade areas. City funds go towards the repair of existing play equipment and toward demolishing existing play equipment and the placement of new slab.		
Five Year Summary	Renovation of existing facilities Citywide to improve safety and user experience.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,000,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will increase community development and friendships as well as enjoyable exercise for all participants. This will also provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 200,000.00
		2017	\$ 200,000.00
		2018	\$ 200,000.00
		2019	\$ 200,000.00
2020	\$ 200,000.00		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	City Wide Playground Equipment Replacement	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	3	9	
Life Expectancy of Project	3	9	
Percent of Population Served by Project:	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>46</b>	<b>135</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Uptown Dog Park	Department Priority Ranking	24
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	3232 St. Thomas Street @ Tchop	Council District	B
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Create Dog Park/Dog Run, designed with national best practices to create safe space for dogs to run and play off leash.		
Five Year Summary	Provide Designated Dog Park in Uptown New Orleans.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	25,000
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 500,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. Balance the use of on and off-leash dog parks and human usage according national best practice standards.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Renovated facilities aids constructive programing of youth development as well as creating balance and providing opportunities for residents with on and off leash dog parks.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 500,000.00
		2017	
		2018	
		2019	
		2020	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Uptown Dog Park	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	3	9	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	3	9	
Percent of Population Served by Project:	2	6	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	4	3	
TOTAL Ranking	46	126	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	City Wide HVAC Replacement	Department Priority Ranking	8
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Multiple Locations	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replacement of failing and outdated HVAC systems in NORDC facilities. Old/outdated/underperforming HVAC equipment requires increase maintenance and operation expenses.		
Five Year Summary	Provide reliable HVAC systems for facilities serving youth and elderly.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,000,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 200,000.00
		2017	\$ 200,000.00
		2018	\$ 200,000.00
		2019	\$ 200,000.00
2020	\$ 200,000.00		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	Blank	Department Name	Blank
Project Name	City Wide HVAC Replacement	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	4	12	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>48</b>	<b>141</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	City Wide Lighting - HML Pavilion	Department Priority Ranking	9
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Multiple Locations	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repair of High Mast Lighting in parks and playgrounds, athletic fields, and covered basketball pavilions.		
Five Year Summary	Repairs to damaged lighting at NORDC facilities to improve safety, user experience, and prevents interruption of programming during evening hours.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 500,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Increased evening athletic programing/activity for logal and regional events and improves public safety.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	
		2017	
		2018	\$ 250,000.00
		2019	\$ 250,000.00
2020			
Is the surrounding intrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	Blank	Department Name	Blank
Project Name	City Wide Lighting - HML Pavilion	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	3	9	
Life Expectancy of Project	3	9	
Percent of Population Served by Project:	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>46</b>	<b>135</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Parking and lighting	Department Priority Ranking	15
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	5601 Read Blvd..	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Three supplementary parking areas servicing the Rec Center, Track, Football Concessions, and Pool Facilities totaling 130 spots; Scope to include sitework, final grading, concrete parking, curbs, stripping 20 parking lot light fixtures with electrical work. This project will also include tack high mast lighting, inner loop asphalt path repairs and an additional 34 spaces to accommodate the maintenance building parking.		
Five Year Summary	Improve recreational facilities for public usage. The design, surveying, and testing will take place in 2016 and the construction in 2017.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	75,000
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,715,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid in recreational needs for NORD's participants year round.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	
		2017	\$ 1,715,000.00
		2018	
		2019	
2020			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Parking and lighting	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	3	9	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>45</b>	<b>132</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Lagoon, ecosystem, and ropes course	Department Priority Ranking	16
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	5601 Read Blvd.	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repair / replace park culvert system; install aeration system in lagoons; design and develop a healthy shoreline including bulkheads and appropriate vegetation; construct fishing piers, canoe/kayak launches, nature trails and picnic area; repair ropes course.		
Five Year Summary	Renovation and enhancement of existing facilities at Joe W. Brown to improve safety and allow for development of best in class Outdoors programming.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	150,000
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$1,700,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.	Yes. This section of the park is part of the water runoff system through Sewerage & Water board.		
What Benefit(s) will be provided to Public from this project?	Community development, environmental awareness, friendships, family unity and exercise	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 1,000,000.00
		2017	\$ 700,000.00
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Lagoon, ecosystem, and ropes co	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	3	9	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>48</b>	<b>141</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Victory Track HML and storage	Department Priority Ranking	14
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	5601 Read Blvd.	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	HML lighting for Victory Track; construction of a storage facility for track equipment.		
Five Year Summary	Enhancement of existing facilities at Joe W. Brown Playground to allow for nighttime track events, safe storage of track equipment, and an improved user experience.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	50,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 300,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods. The facility is currently underutilized by not being available for nighttime events.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Increased athletic opportunity for local and regional events; improved public safety.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 300,000.00
		2017	
		2018	
		2019	
2020			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?		If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Victory Track HML and storage	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	2	6	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	3	9	
Percent of Population Served by Project:	2	6	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	2	6	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>40</b>	<b>117</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Lemann Lafitte Greenway Playground	Department Priority Ranking	3
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	St. Louis St. @ N. Prieur St.	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Requesting bond funds for the construction of amenities that were not included in other funding sources for the construction of restrooms, concessions, storage facility; fencing; HML, bleachers, little league baseball diamond, water fountain, and demolition of foundation slab.		
Five Year Summary	Enhancement of newly developed facilities at Lafitte Greenway to allow for recreational activity, safe storage of equipment, and an improved user experience.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	50,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 2,000,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Recreational facilities aid constructive programing of youth development.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 2,000,000.00
		2017	
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Lemann Lafitte Greenway Playground	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	2	6	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	4	3	
TOTAL Ranking	47	129	

## Capital Budget Request Form

<b>Agency Number</b>	580	<b>Department Name</b>	NORD
<b>Project Name</b>	Pontchartrain Park athletics building	<b>Department Priority Ranking</b>	22
<b>Project Type</b>	New Construction	<b>Is a Land acquisition needed? (Y/N)</b>	No
<b>Will this project be a permanent immovable improvement?</b>	Yes	<b>Does the request meet the General Obligation Bond requirement?</b>	
<b>Project Address</b>	Hayne Blvd. near Congress St.	<b>Council District</b>	D
<b>Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.</b>	Construction of new building with restrooms, concessions, storage space; fencing; drinking water fountain		
<b>Five Year Summary</b>	Ongoing enhancement of Pontchartrain Park to allow for recreational activity, safe storage of equipment, and an improved user experience.		
<b>Has an Architect or Engineer prepared drawings for this project?</b>	No	<b>If Yes please explain how this was funded and current status</b>	
<b>Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)</b>	Yes	<b>Please provide estimate of increase or decrease operating costs.</b>	50,000.00
<b>Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)</b>	\$ 600,000.00	<b>Proposed Funding Source</b>	
<b>Does this project fall in line with the current Zoning requirements</b>	Yes	<b>If no please list required change</b>	
<b>Please discuss how the project conforms to objectives and recommendations of the Master Plan:</b>	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods. The facility is currently underutilized by not having restrooms or storage space near the established tennis and basketball courts.		
<b>Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.</b>			
<b>What Benefit(s) will be provided to Public from this project?</b>	Increased athletic opportunity for local and regional events; improved public safety.	<b>For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount</b>	
		2016	
		2017	
		2018	\$ 600,000.00
		2019	
2020			
<b>Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?</b>	Yes	<b>If no please discuss required improvements and estimated costs</b>	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Pontchartrain Park athletics building	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	3	9	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	3	9	
Environmental Quality and Stormwater Management	4	3	
<b>TOTAL Ranking</b>	<b>47</b>	<b>129</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	City Wide Fencing	Department Priority Ranking	13
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Multiple Locations	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repairs / replacement of park fencing throughout the City.		
Five Year Summary	Provide safe and reliable fencing on NORDC ball fields, stadiums, playgrounds.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 500,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Maintain preexisting properties; upgrade ad meet safety standards and compliance		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Public Safety	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 250,000.00
		2017	\$ 125,000.00
		2018	
		2019	
2020			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	City Wide Fencing	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	2	6	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	2	6	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>43</b>	<b>126</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Security Cameras	Department Priority Ranking	12
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Multiple Locations	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Installation of security cameras at all active NORDC facilities. Current bond funded cameras: Sanchez, Treme, Gernon Brown		
Five Year Summary	Improvement to security at NORDC facilities to improve safety and user experience.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,000,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Provide safe and accessible public recreation facilities.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Enhance Public Safety	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 200,000.00
		2017	\$ 200,000.00
		2018	\$ 200,000.00
		2019	\$ 200,000.00
2020	\$ 200,000.00		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

**Capital Budget Request Priority Rating Form**

Agency Number	580	Department Name	NORD
Project Name	Security Cameras	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	4	12	
Life Expectancy of Project	3	9	
Percent of Population Served by Project	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	47	138	

**Capital Budget Request Form**

Agency Number	580	Department Name	NORD
Project Name	Skelly Rupp Baseball Diamond	Department Priority Ranking	19
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	2200 Vespasian Street	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Coaches office renovation, new roof covering, renovation of bathroom facilities, and replace PA system.		
Five Year Summary	Improve the Skelly Rupp Baseball recreational facilities for enhanced public usage.		
Has an Architect or Engineer prepared drawings for this project?	Yes	If Yes please explain how this was funded and current status	FEMA
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,500,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will also provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Renovated facilities aids constructive programing of youth development.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	
		2017	\$ 750,000.00
		2018	\$ 750,000.00
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Skelly Rupp Baseball Diamond	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	4	12	
Life Expectancy of Project	3	9	
Percent of Population Served by Project	2	6	
Relation to adopted Plans	3	9	
Intensity of Use	2	6	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	3	9	
Timeliness/ External	1	3	
Public Support	3	9	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>44</b>	<b>129</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Werner Playground	Department Priority Ranking	17
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	4600 Werner b/w Grant & Leeds	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Remove/Replace play equipment, repair basketball court, replace standards, backboards, goals, nets & restripe court; replace facility fencing, and sidewalk repairs/replacing. Kaboom! Provides the funds for the play equipment, only.		
Five Year Summary	Renovation of existing facilities at Werner Playground to improve safety and user experience.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 400,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will also provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 400,000.00
		2017	
		2018	
		2019	
2020			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

**Capital Budget Request Priority Rating Form**

Agency Number	580	Department Name	NORD
Project Name	Werner Playground	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	2	6	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	2	6	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	3	9	
Timeliness/ External	1	3	
Public Support	3	9	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>43</b>	<b>126</b>	

## Capital Budget Request Form

<b>Agency Number</b>	580	<b>Department Name</b>	NORD
<b>Project Name</b>	Willie Hall	<b>Department Priority Ranking</b>	1
<b>Project Type</b>	New Construction	<b>Is a Land acquisition needed? (Y/N)</b>	No
<b>Will this project be a permanent immovable improvement?</b>	Yes	<b>Does the request meet the General Obligation Bond requirement?</b>	
<b>Project Address</b>	Milton St. @ Cadillac	<b>Council District</b>	D
<b>Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.</b>	3,000 square foot clubhouse with restroom, concession stand, storage; interior and exterior water fountains; 80 yard multi-purpose football field; little league baseball diamond, backstops, fencing, dugouts, bleachers; HML; full court basketball covered pavilion with lighting; play equipment structure.		
<b>Five Year Summary</b>	To replace pre-existing playground and amenities, lost due to the new construction of John Mac 35 high school		
<b>Has an Architect or Engineer prepared drawings for this project?</b>	No	<b>If Yes please explain how this was funded and current status</b>	
<b>Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)</b>	Yes	<b>Please provide estimate of increase or decrease operating costs.</b>	50,000.00
<b>Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)</b>	\$ 2,500,000.00	<b>Proposed Funding Source</b>	
<b>Does this project fall in line with the current Zoning requirements</b>	Yes	<b>If no please list required change</b>	
<b>Please discuss how the project conforms to objectives and recommendations of the Master Plan:</b>	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community.		
<b>Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.</b>			
<b>What Benefit(s) will be provided to Public from this project?</b>	New construction will replace services lost to the community	<b>For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount</b>	
		2016	\$ 2,500,000.00
		2017	
		2018	
		2019	
2020			
<b>Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?</b>	Yes	<b>If no please discuss required improvements and estimated costs</b>	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Willie Hall	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	3	9	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	2	6	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	3	9	
Timeliness/ External	1	3	
Public Support	3	9	
Environmental Quality and Stormwater Management	4	3	
<b>TOTAL Ranking</b>	<b>46</b>	<b>126</b>	

### Capital Budget Request Form

Agency Number	580	Department Name	NORD
Project Name	Richard Lee	Department Priority Ranking	20
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	Yes
Project Address	2200 Andry Street	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Development and construction of new Richard Lee playground. The Richard Lee master plan provides both passive and active recreation as compared to the actively programmed parks in the surrounding area. There are four other parks in the area that are sized for little league and softball play. The Alfred Lawless school across the street has room for a high school football field. The master plan for Richard Lee includes a high school baseball field and an open lawn for freeplay or football and soccer practice. The passive spaces include picnic pavilions, small alcove spaces, and long walking paths. Richard Lee Park and the structures in it have been in need of repair or replacement since Hurricane Katrina. The basketball court overhead structure is degraded, buildings are aged and vacant, fences are rusted and broken, and much of the		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	Yes	If Yes please explain how this was funded and current status	Bond
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	50,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 5,100,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will also provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.	The site will be landscaped with sod, seed, and native shade trees. Bio retention cells are designed with native plants that require little maintenance and will aos filter pollutants.		
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 500,000.00
		2017	\$ 4,600,000.00
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

**Capital Budget Request Priority Rating Form**

Agency Number	580	Department Name	NORD
Project Name	Richard Lee	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	2	6	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	4	3	
TOTAL Ranking	47	129	

## Capital Budget Request Form

Agency Number	580	Department Name	NORD
Project Name	Treme Recreation Center Elevator	Department Priority Ranking	6
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	Yes
Project Address	900 N. Villere Street	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Install elevator into recreation center		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	Blank	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 400,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community, especially those with physical challenges. The installation of the elevator will make the recreation center ADA compliant and thus allow full access to the center for all community members.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Renovated facilities will provide full access to the recreation center and ADA compliance.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 400,000.00
		2017	
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Treme Recreation Center Elevator	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	3	9	
Protection of Capital Stock	1	3	
Economic Development	4	12	
Operating Budget	3	9	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	2	6	
Relation to adopted Plans	1	3	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	Blank	3	
TOTAL Ranking	44	132	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	Playground	Department Priority Ranking	23
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	Yes
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	Yes
Project Address	1151 Esplanade Avenue	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Reclaim bllighted space for public use.		
Five Year Summary	Provide playground in French Quarter area of New Orleans. Currently working with MY NOLA PARKS as a potential partnet for funds/support.		
Has an Architect or Engineer prepared drawings for this project?	Blank	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	50,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,250,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. This will also provide recreational opportunities appropriate to the demographics to the surrounding neighborhoods.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 1,250,000.00
		2017	
		2018	
		2019	
		2020	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Playground	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	2	6	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	4	3	
<b>TOTAL Ranking</b>	<b>47</b>	<b>129</b>	

## Capital Budget Request Form

Agency Number	580	Department Name	NORD
Project Name	St. Bernard Center	Department Priority Ranking	4
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	1500 Lafreniere Street	Council District	D
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	All interior and exterior doors, frames, hardware; total renovation of all restrooms, offices, and public space; gymnasium flooring, seating, ceiling renovation / replacement; HVAC system; replace elevator; renovation of pool locker rooms and showers.		
Five Year Summary	Renovation of existing facilities to improve safety and user experience at the St. Bernard Recreation Center.		
Has an Architect or Engineer prepared drawings for this project?	Yes	If Yes please explain how this was funded and current status	FEMA & Bond Funds
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 6,600,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. Please note that due to condition of the facility, recreational programming has been extremely limited for the past year.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise and healthy life styles.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 600,000.00
		2017	\$ 6,000,000.00
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

**Capital Budget Request Priority Rating Form**

Agency Number	580	Department Name	NORD
Project Name	St. Bernard Center	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	3	9	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	3	9	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	3	9	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>48</b>	<b>141</b>	

### Capital Budget Request Form

Agency Number	580	Department Name	NORD
Project Name	City Wide Skate Park	Department Priority Ranking	25
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Lafitte Greenway	Council District	D
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Development and construction of a new skate park in Lafitte Greenway.		
Five Year Summary	Funds are being requested for over two years : \$50,000 for design in year 2016 and \$500,000 in construction in year 2017.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	20,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 250,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community. Please note that due to condition of the facility, recreational programming has been extremely limited for the past year.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Community development, friendships, family unity and exercise and healthy life styles.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 250,000.00
		2017	
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	City Wide Skate Park	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	2	6	
Protection of Capital Stock	3	9	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	3	9	
Percent of Population Served by Project	2	6	
Relation to adopted Plans	3	9	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	3	9	
Availability of Financing	1	3	
Special Need	3	9	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	4	3	
<b>TOTAL Ranking</b>	<b>48</b>	<b>132</b>	

### Capital Budget Request Form

Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Bridge	Department Priority Ranking	7
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	5601 Read Blvd	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Total replacement of traffic/pedestrian bridge in the interior of Joe W. Brown Regional Park. The closure of the bridge has divided the park into two - Pedestrians may access the park through the front entrance and vehicles can only access the park through the back entrance.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 500,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population of the surrounding community.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Life safety compliance	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 500,000.00
		2017	
		2018	
		2019	
2020			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Bridge	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	4	12	
Protection of Capital Stock	4	12	
Economic Development	1	3	
Operating Budget	2	6	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	1	3	
Relation to adopted Plans	1	3	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	4	12	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	2	6	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	4	3	
<b>TOTAL Ranking</b>	<b>48</b>	<b>132</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	City Wide Pool Renovations	Department Priority Ranking	10
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	City Wide	Council District	Blank
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Remove/Replace of pumps, filters, chlorination system, showers, restrooms, pool tubs, fencing, etc.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,000,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population. It will also decrease operating funds by reducing the amount of used chemicals and service visits.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Wholesome recreation through public swimming and life saving skills presented through learn to swim programming, water aerobics, and healthy life styles.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 400,000.00
		2017	\$ 300,000.00
		2018	\$ 300,000.00
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

**Capital Budget Request Priority Rating Form**

Agency Number	580	Department Name	NORD
Project Name	City Wide Pool Renovations	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	4	12	
Protection of Capital Stock	4	12	
Economic Development	4	12	
Operating Budget	3	9	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to adopted Plans	1	3	
Intensity of Use	2	6	
Scheduling	4	12	
Benefit/ Cost	3	9	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	2	6	
Energy Consumption	3	9	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>44</b>	<b>129</b>	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	McCue Playground	Department Priority Ranking	2
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	2600 Franklin Ave	Council District	D
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Construction of new clubhouse to include restrooms, concessions, storage, and community space. To include design, surveying, testing, and construction		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 500,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	To provide facilities that aid in the constructive programming of youth development and improves public safety.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 500,000.00
		2017	
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	McCue Playground	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	4	12	
Protection of Capital Stock	1	3	
Economic Development	3	9	
Operating Budget	1	3	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	1	3	
Relation to adopted Plans	1	3	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	3	9	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	2	6	
Energy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>39</b>	<b>114</b>	

### Capital Budget Request Form

Agency Number	580	Department Name	NORD
Project Name	Odile Davis	Department Priority Ranking	18
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Corner of Law and N. Dorgenois	Council District	D
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Renovate existing clubhouse and bathrooms.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	Please provide estimate of increase or decrease operating costs.	20,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 120,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will aid our need for adequate facilities to serve the general public and population.		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	To provide facilities that aid in the constructive programming of youth development and improves public safety.	For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount	
		2016	\$ 120,000.00
		2017	
		2018	
		2019	
	2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Odile Davis	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	4	12	
Protection of Capital Stock	1	3	
Economic Development	3	9	
Operating Budget	1	3	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	3	9	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	2	6	
Entergy Consumptom	1	3	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>39</b>	<b>114</b>	

## Capital Budget Request Form

<b>Agency Number</b>	580	<b>Department Name</b>	NORD
<b>Project Name</b>	Stallings Gently	<b>Department Priority Ranking</b>	21
<b>Project Type</b>	Renovation	<b>Is a Land acquisition needed? (Y/N)</b>	No
<b>Will this project be a permanent immovable improvement?</b>	Yes	<b>Does the request meet the General Obligation Bond requirement?</b>	
<b>Project Address</b>	2700 Lapeyrouse St.	<b>Council District</b>	D
<b>Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.</b>	Renovation of existing bathroom and showers, building addition, and pool repairs		
<b>Five Year Summary</b>	Phase I design is underway and construction scheduled to start late 2015 with a six month duration. Phase I will focus on field improvements for pee-wee baseball field and practice football area, minor sidewalk and fence repairs, and baseball equipment. Phase II is not currently funded, but would address pool and clubhouse replacement or major renovation. \$50,000 for design in year 2016 and \$500,000 in construction in year 2017.		
<b>Has an Architect or Engineer prepared drawings for this project?</b>	No	<b>If Yes please explain how this was funded and current status</b>	
<b>Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)</b>	Yes	<b>Please provide estimate of increase or decrease operating costs.</b>	
<b>Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)</b>	\$ 500,000.00	<b>Proposed Funding Source</b>	
<b>Does this project fall in line with the current Zoning requirements</b>	Yes	<b>If no please list required change</b>	
<b>Please discuss how the project conforms to objectives and recommendations of the Master Plan:</b>	This project will aid our need for adequate facilities to serve the general public and population.		
<b>Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.</b>	Yes, Pool repairs would improve runoff water quality by decreasing the amount of chlorinated water leaking from the pool.		
<b>What Benefit(s) will be provided to Public from this project?</b>	To provide facilities that aid in the constructive programming of youth development and improves public safety.	<b>For what year are you requesting the Project? 2016,2017, 2018, 2019,or 2020? Enter amount</b>	
		2016	\$ 100,000.00
		2017	\$ 400,000.00
		2018	
		2019	
2020			
<b>Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?</b>	Yes	<b>If no please discuss required improvements and estimated costs</b>	

### Capital Budget Request Priority Rating Form

Agency Number	580	Department Name	NORD
Project Name	Stallings Gentilly	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	4	12	
Protection of Capital Stock	1	3	
Economic Development	3	9	
Operating Budget	1	3	
Life Expectancy of Project	4	12	
Percent of Population Served by Project	1	3	
Relation to adopted Plans	1	3	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	3	9	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	2	6	
Energy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	4	12	
Environmental Quality and Stormwater Management	1	3	
<b>TOTAL Ranking</b>	<b>39</b>	<b>114</b>	

Blank	Blank	Blank	Blank
New			
Construction	Yes	A	1
Renovation	No	B	2
Repairs		C	3
Upgrade		D	4
Feasability			
Study		E	
Equipment			

- |       |                                             |
|-------|---------------------------------------------|
| Blank | Blank                                       |
| 200   | City Council                                |
| 210   | Mayors Office                               |
| 220   | Chief Administrative Officer                |
| 230   | Law                                         |
| 250   | NOFD                                        |
| 270   | NOPD                                        |
| 300   | Sanitation                                  |
| 360   | Health                                      |
| 380   | Welfare                                     |
| 399   | Retirement                                  |
| 400   | Finance                                     |
| 450   | Property Management                         |
| 500   | DPW                                         |
| 550   | Utilities                                   |
| 580   | NORD                                        |
| 600   | Unattaced Boards and Commisions             |
| 620   | Parks and Parkways                          |
| 630   | Library                                     |
| 640   | Historic Dististct and Landmarks Commission |
| 650   | Vieux Carre Commision                       |
| 655   | Alcohol and Beverage                        |
| 670   | City Planning                               |
| 685   | Moquito Control                             |
| 689   | NOMA                                        |
| 700   | Misc                                        |
| 710   | General Services                            |
| 750   | Housing Urban Development                   |
| 770   | Training Division                           |
| 781   | Economic Development                        |
| 782   | Neighborhood Housing                        |
| 799   | Intergovermental                            |

800 Judicial  
810 District Attorney  
820 Coroner  
830 Juvenile Court  
832 First City Court  
834 Civil Court  
835 Municipal Court  
837 Criminal Court  
850 Criminal Sheriff  
860 Criminal District Court  
870 Registrar of Voters  
880 Judicial Retirement  
890 Enterprise Funds  
892 French Market  
893 Upper Porta  
894 Delgado Plantation  
895 Municipal Yacht Harbor  
896 Orleans Parish Commision  
897 Rivergate Development  
898 Canal St. Development  
899 Clearing Fund  
900 Aviation

Blank

Blank

200 City Council  
210 Mayors Office  
220 Chief Administrative Officer  
230 Law  
250 NOFD  
270 NOPD  
300 Sanitation  
360 Health  
380 Welfare  
399 Retirement  
400 Finance  
450 Property Management  
500 DPW  
550 Utilities  
580 NORD  
600 Unattaced Boards and Commisions  
620 Parks and Parkways  
630 Library  
640 Historic Dististc and Landmarks Commission  
650 Vieux Carre Commision  
655 Alcohol and Beverage  
670 City Planning  
685 Moquito Control  
689 NOMA  
700 Misc  
710 General Services  
750 Housing Urban Development  
770 Training Division  
781 Economic Development  
782 Neighborhood Housing  
799 Intergovernmental  
800 Judicial  
810 District Attorney  
820 Coroner  
830 Juvenile Court  
832 First City Court  
834 Civil Court  
835 Municipal Court  
837 Criminal Court  
850 Criminal Sheriff  
860 Criminal District Court  
870 Registar of Voters  
880 Judicial Retirement  
890 Enterprise Funds  
892 French Market  
893 Upper Porta

894 Delgado Plantation  
895 Municipal Yacht Harbor  
896 Orleans Parish Commision  
897 Rivergate Development  
898 Canal St. Development  
899 Clearing Fund  
900 Aviation