	2015- 2019 Capital Budget Request Form											
Department												
Agency												
Number	500	Contact Name					Mark Jerniga	an				
Department												
Name	DPW	Contact Number					658-8002					
Date		Contact E-Mail		mdjernigan@nola.gov								
	Department	Prioirty Criteria										
Request #	Ranking	Ranking	Project Name	F	Project Amount		2015		2016	2017	2018	2019
1	1	57	Enhancements	\$	250,000,000.00	\$	50,000,000.00	\$	50,000,000.00	\$ 50,000,000.00	\$ 50,000,000.00	\$ 50,000,000.00
2	2	51	Major Streets	\$	50,000,000.00	\$	10,000,000.00	\$	10,000,000.00	\$ 10,000,000.00	\$ 10,000,000.00	\$ 10,000,000.00
3	3	51	Minor Streets	\$	100,000,000.00	\$	20,000,000.00	\$	20,000,000.00	\$ 20,000,000.00	\$ 20,000,000.00	\$ 20,000,000.00
4	4	51	Arterial - Urban Systems	\$	200,000,000.00	\$	40,000,000.00	\$	40,000,000.00	\$ 40,000,000.00	\$ 40,000,000.00	\$ 40,000,000.00
5	5	51	Recovery Roads Program	\$	251,428,428.00	\$	95,351,064.00	\$	72,989,441.00	\$ 51,589,865.00	\$ 31,498,058.00	
TOTAL				\$	851,428,428.00	\$	215,351,064.00	\$	192,989,441.00	\$ 171,589,865.00	\$ 151,498,058.00	\$ 120,000,000.00

Department Head			
ignature	Printed Name	Mark D. Jernigan	
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Capital Budget Request Form						
Agency Number	500	Department Name	DPW			
Project Name	Enhancements	Department Priority Ranking	1			
Project Type	Upgrade	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		Council District	Blank			
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	replacement, streetscapes, pedestrian safe	ty and other complete streets related init	water management, ADA access ramps, lighting, bridge iatives, traffic management, public works, and other is on specified projects subject to eligibility.			
Five Year Summary	Enhance the quality of life in the City of N	New Orleans and promote public safety a infrastructure	nd economic development through investment in			
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.)	\$ 250,000,000.00	Proposed Funding Source	\$60,000,000 in Unsold Bond Funds & \$190,000,000 in matching Federal funds			
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:						
What Benefit(s) will be provided to Public from this project?	Improved transportation system	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015-2019			
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 Prioirty Rating Form						
Agency Number	500	Department Name	DPW			
Project Name	Enhancements	Department Priority Ranking	1			
Categories	Rating		Score			
Public Health and Safety	3		9			
External Requirements	1		3			
Protection of Capital Stock	1		3			
Economic Development	1		3			
Operating Budget	1		3			
Life Expectancy of Project	1		3			
Percent of Population Served by Project:	1		3			
Relation to dopted Plans	1		3			
Intensity of Use	1		3			
Scheduling	1		3			
Benefit/ Cost	1		3			
Potential for Duplication	1		3			
Availability of Financing	1		3			
Special Need	1		3			
Entergy Consumptiom	1		3			
Timeliness/ External	1		3			
Public Support	1		3			
TOTAL Ranking	19		57			

Capital Budget Request Form						
Agency Number	500	Department Name	DPW			
Project Name	Major Streets	Department Priority Ranking	2			
Project Type	Upgrade	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		Council District	Blank			
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	streets where the pavement has Failed or is i	n Very Poor condition and the undergrou	may include the full reconstruction of major collector nd utilities have reached or exceeded their design life ets where the pavement is in Fair or Poor condition.			
Five Year Summary	Promote public sa	fety and economic development by impr	oving street infrastructure.			
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	If yes please provide estimate of increase in operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 50,000,000.00	Proposed Funding Source	Unsold Bond Funds			
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:						
What Benefit(s) will be provided to Public from this project?	Improved road network	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015-2019			
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 Prioirty Rating Form					
Agency Number	500	Department Name	DPW		
Project Name	Major Streets	Department Priority Ranking	2		
Categories	Rating		Score		
Public Health and Safety	1		3		
External Requirements	1		3		
Protection of Capital Stock	1		3		
Economic Development	1		3		
Operating Budget	1		3		
Life Expectancy of Project	1		3		
Percent of Population Served by Project:	1		3		
Relation to dopted Plans	1		3		
Intensity of Use	1		3		
Scheduling	1		3		
Benefit/ Cost	1		3		
Potential for Duplication	1		3		
Availability of Financing	1		3		
Special Need	1		3		
Entergy Consumptiom	1		3		
Timeliness/ External	1		3		
Public Support	1		3		
TOTAL Ranking	17		51		

Capital Budget Request Form						
Agency Number	500	Department Name	DPW			
Project Name	Minor Streets	Department Priority Ranking	3			
Project Type	Upgrade	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		Council District	Blank			
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	rements, their design life and/or the upgrade of underground utilities and the repaying of minor neighborhood-level street					
Five Year Summary	Promote public sa	ifety and economic development by impr	oving street infrastructure.			
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	If yes please provide estimate of increase in operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 100,000,000.00	Proposed Funding Source	Unsold Bond Funds			
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:						
What Benefit(s) will be provided to Public from this project?	Improved Road Network	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015-2019			
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 Prioirty Rating Form					
Agency Number	500	Department Name	DPW		
Project Name	Minor Streets	Department Priority Ranking	3		
Categories	Rating		Score		
Public Health and Safety	1		3		
External Requirements	1		3		
Protection of Capital Stock	1		3		
Economic Development	1		3		
Operating Budget	1		3		
Life Expectancy of Project	1		3		
Percent of Population Served by Project:	1		3		
Relation to dopted Plans	1		3		
Intensity of Use	1		3		
Scheduling	1		3		
Benefit/ Cost	1		3		
Potential for Duplication	1		3		
Availability of Financing	1		3		
Special Need	1		3		
Entergy Consumptiom	1		3		
Timeliness/ External	1		3		
Public Support	1		3		
TOTAL Ranking	17		51		

Capital Budget Request Form						
Agency Number	500	Department Name	DPW			
Project Name	Arterial - Urban Systems	Department Priority Ranking	4			
Project Type	Upgrade	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		Council District	Blank			
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Funds will be used to continue the major/urban arterial street construction program. This program may include the full reconstruction of major/urban arterial system streets where the pavement has Failed or is in Very Poor condition and the underground utilities have reached or exceeded their design life and/or the upgrade of underground utilities and the repaving of major/urban arterial system streets where the pavement is in Fair or Poor condition.					
Five Year Summary	Promote public sa	ifety and economic development by impr	oving street infrastructure.			
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	If yes please provide estimate of increase in operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 200,000,000.00	Proposed Funding Source	\$40,000,000 Unsold Bond Funds & \$160,000,000 in matching Federal Funds			
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:						
What Benefit(s) will be provided to Public from this project?	Improved Road Network	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015-2019			
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 Prioirty Rating Form						
Agency Number	500	Department Name	DPW			
Project Name	Arterial - Urban Systems	Department Priority Ranking	4			
Categories	Rating		Score			
Public Health and Safety	1		3			
External Requirements	1		3			
Protection of Capital Stock	1		3			
Economic Development	1		3			
Operating Budget	1		3			
Life Expectancy of Project	1		3			
Percent of Population Served by Project:	1		3			
Relation to dopted Plans	1		3			
Intensity of Use	1		3			
Scheduling	1		3			
Benefit/ Cost	1		3			
Potential for Duplication	1		3			
Availability of Financing	1		3			
Special Need	1		3			
Entergy Consumptiom	1		3			
Timeliness/ External	1		3			
Public Support	1		3			
TOTAL Ranking	17		51			

Capital Budget Request Form						
Agency Number	500	Department Name	DPW			
Project Name	Recovery Roads Program	Department Priority Ranking	5			
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?	No			
Project Address		Council District	Blank			
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		epairs to damage to minor streets in all 75 diate aftermath. NOTE: Total Estimate in	5 neighborhoods flooded or damaged as a result of cludes funding obligated in prior years			
Five Year Summary	Promote public safety and e	conomic recovery by repairing Katrina-rel	lated damage to street infrastructure.			
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	If yes please provide estimate of increase in operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 251,428,428.00	Proposed Funding Source	FEMA			
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:						
What Benefit(s) will be provided to Public from this project?	Repaired Road Network	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015-2018			
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 Prioirty Rating Form						
Agency Number	500	Department Name	DPW			
Project Name	Recovery Roads Program	Department Priority Ranking	4			
Categories	Rating		Score			
Public Health and Safety	1		3			
External Requirements	1		3			
Protection of Capital Stock	1		3			
Economic Development	1		3			
Operating Budget	1		3			
Life Expectancy of Project	1		3			
Percent of Population Served by Project:	1		3			
Relation to dopted Plans	1		3			
Intensity of Use	1		3			
Scheduling	1		3			
Benefit/ Cost	1		3			
Potential for Duplication	1		3			
Availability of Financing	1		3			
Special Need	1		3			
Entergy Consumptiom	1		3			
Timeliness/ External	1		3			
Public Support	1		3			
TOTAL Ranking	17		51			