			2015- 2019 Capi	tal	Budget	Request F	orm			
Department										
Agency Number	580	Contact Name				Victor N. Ric	chard. III			
Department	300	Contact Harris				710001 111 1110				
Name	NORDC	Contact Number				658-30	15			
Date	6/11/2014	Contact E-Mail				vnrichard@i	nola.gov			
					Project					
Dogwood #	Department	Prioirty Criteria	Draiget Name		-	201E	2016	2017	2018	2010
Request #	Ranking	Ranking	Project Name	,	Amount	2015	2016	2017	2018	2019
1	12	132	Annunciation Center/Playground	\$	912,500		\$912,500			
-	12	132	City Wide Playground Equipment	7	312,300		7512,500			
2	C	135		۲.	1 350 000	¢350,000	¢350,000	¢250,000	¢350,000	¢350,000
3	6 16	132	Replacement City Wide Skate Park	\$	1,250,000 250,000	\$250,000	\$250,000 \$250,000	\$250,000	\$250,000	\$250,000
4	17	126	Uptown Dog Park	\$	250,000		\$250,000			
5	4	141	Citywide HVAC replacement	\$	700,000	\$350,000	\$350,000			
3	4	141	Citywide Lighting - HML and	۲	700,000	\$330,000	3330,000			
6	5	135	Pavilion	\$	1,000,000	\$200,000	\$200,000	\$200,000	\$200,000	\$200,000
7	13	129	Donsereaux/Harrison Playground	\$	100,000		\$100,000			
			Joe W. Brown Park parking and						4	
8	19	132	lighting	\$	1,715,000				\$1,715,000	
			loc W. Brown Lagoon, acceptation							
9	11	141	Joe W. Brown Lagoon, ecosystem, and ropes course repairs	\$	1,700,000		\$1,000,000	\$700,000		
9	11	141	Joe W. Brown Victory Track HML	Ş	1,700,000		\$1,000,000	\$700,000		
10	10	117	and storage	\$	300,000		\$300,000			
10	10	117	Lemann Lafitte Greenway	٧	300,000		7300,000			
11	8	129	Playground	\$	2,000,000	\$2,000,000				
12	20	141	50 meter Natatorium	\$	12,000,000	ψ=,000,000			\$6,000,000	\$6,000,000
			Pontchartrain Park athletics	т.	,_,				+ 0,000,000	+ 0,000,000
13	21	129	building	\$	600,000				\$600,000	
14	9	126	City wide Fencing	\$	500,000	\$100,000	\$200,000	\$200,000		
15	1	138	Security Cameras	\$	1,000,000	\$250,000	\$250,000	\$250,000	\$250,000	
16	18	129	Skelly Rupp Baseball Diamond	\$	1,500,000	-		\$750,000	\$750,000	
17	3	141	St. Bernard Center	\$	6,000,000	\$6,000,000				
18	15	129	Werner Playground	\$	400,000		\$400,000			
19	2	126	Willie Hall	\$	2,500,000	\$2,500,000				
20	7	132	Treme Recreation Center Elevator	\$	250,000	\$250,000				
21	22	129	Richard Lee Playground	\$	4,600,000	,,			\$2,300,000	\$2,300,000
22	14	129	Playground	\$	1,250,000		\$1,250,000		, ,==,,==	, ,,
TOTAL			,,,	\$	34,677,500	\$11,650,000	\$4,462,500	\$2,350,000	\$9,765,000	\$6,450,000

Department Head			
Signature	Printed Name		
•			
Date			

	Capital Budget Red	quest Form	
Agency Number	580	Department Name	NORDC
Project Name	Annunciation Center/Playground	Department Priority Ranking	12
Project Type	Renovations: Building Improvement	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	346 Eleonore Street & Annunciation Street	Council District	В
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repair/replace facility plumbing, hvac; Rotiles, basketball court restriping, repair/r		
Five Year Summary	Renovation of existing facilities to im	prove safety and user ex Playground.	perience at the Annunciation Center &

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	If yes please provide estimate of increase in 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:		t this facility has not offe	red recreational programming for the past
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? 2015,2016, 2017, 2018,or 2019?	2016
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 Pr	ioirty Ratin	g Form
Agency Number	580	Department Name	NORD
Project Name	Annunciation Center/Playground	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	3		9
Life Expectancy of Project	3		9
Percent of Population Served by Projects	3		9
Relation to dopted 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
Entergy Consumptiom	2		6
Timeliness/ External	1		3
Public Support	4		12
TOTAL Ranking	44		132

	Capital Budget R	Request Form	
Agency Number	580	Department Name	NORD
Project Name	City Wide Playground Equipment Replacement	Department Priority Ranking	6
Project Type	Renovations: Building Improvement	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 Playgrounds	Council District	Playspots in each district. A-B-C-D-E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Remove/Replace play equipment, slab, se	eating area, landscaping a	nd shade areas.
Five Year Summary	Renovation of existing faciliti	es Citywide to improve sa	nfety 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	If yes please provide estimate of increase in operating costs.	
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 increase community developarticipants. This will also provide recreat surrounding neighborhoods.	tional opportunities appro	
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? 2015,2016, 2017, 2018,or 2019?	2015, 2016, 2017, 2018, 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	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 Projects	3		9			
Relation to dopted 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			
Entergy Consumptiom	2		6			
Timeliness/ External	1		3			
Public Support	4		12			
TOTAL Ranking	45		135			

Capital Budget Request Form					
Agency Number	580	Department Name	NORD		
Project Name	City Wide Skate Park	Department Priority Ranking	16		
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	n of a new sate park in Lafitte	e Greenway.		
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	If yes please provide estimate of increase in operating costs.			
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:					
What Benefit(s) will be provided to Public from this project?		For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2016		
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** 580 **Department Name NORD Department Priority Project Name** City Wide Skate Park Ranking Categories Score Rating **Public Health and Safety** 12 **External Requirements** 6 **Protection of Capital Stock** 9 **Economic Development** 3 **Operating Budget** 6 **Life Expectancy of Project** 9 nt of Population Served by Pr 6 **Relation to dopted Plans** 9 Intensity of Use 12 Scheduling 12 **Benefit/Cost** 6 **Potential for Duplication** 9 **Availability of Financing** 3 **Special Need** 9 **Entergy Consumptiom** 6 Timeliness/ External 3 **Public Support** 12 **TOTAL Ranking** 44 132

	Capital Bu	udget Request Form	
Agency Number	580	Department Name	NORD
Project Name	Uptown Dog Park	Department Priority Ranking	17
Project Type	Renovation	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?	
Project Address	Uptown New Orleans	Council District	В
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Create Dog Park/Dog Run, designed w leash.	vith national best practices to create s	afe space for dogs to run and play off
Five Year Summary	Provide	Designated Dog Park in Uptown New	Orleans.
Has an Architect or Engineer prepared drawings for this project?		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	If yes please provide estimate of increase in operating costs.	\$ 25,000.00
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 adec surrounding community. Balance the practice standards.		blic and population of the human usage according national best
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? 2015,2016, 2017, 2018,or 2019?	2016
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 Re	equest Prioirty Rating Form	
Agency Number	580	Department Name	NORD
Project Name	Uptown Dog Park	Department Priority Ranking	1
Categories	Rating	Sco	ore
Public Health and Safety	4	1	2
External Requirements	2		5
Protection of Capital Stock	3	9	9
Economic Development	1		3
Operating Budget	2		5
Life Expectancy of Project	3		9
Percent of Population Served by Projects	2		5
Relation to dopted Plans	3		9
Intensity of Use	4	1	2
Scheduling	4	1	2
Benefit/ Cost	2		5
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	3		9
Entergy Consumptiom	2		5
Timeliness/ External	1		3
Public Support	4		.2
TOTAL Ranking	42	1:	26

	Capital Budget Request Form					
Agency Number	580	Department Name	NORD			
Project Name	Citywide HVAC replacement	Department Priority Ranking	4			
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	Blank			
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replacement of failing and outdated HVAC systems in NORDC facilities.					
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	If yes please provide estimate of increase in operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 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.					
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? 2015,2016, 2017, 2018,or 2019?	2015 and 2016			
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	580	Department Name	NORD		
Project Name	Citywide HVAC replacement	Department Priority Ranking	1		
Categories	Rating	Sco	ore		
Public Health and Safety	4	1	2		
External Requirements	2	(	5		
Protection of Capital Stock	4	1	2		
Economic Development	1	•	3		
Operating Budget	4	1	2		
Life Expectancy of Project	4	1	2		
Percent of Population Served by Projects	3	Ç	9		
Relation to dopted Plans	3	<u>(</u>	)		
Intensity of Use	4	1	2		
Scheduling	4	1	2		
Benefit/ Cost	2	(	5		
Potential for Duplication	1	<u> </u>	3		
Availability of Financing	1	3	3		
Special Need	3	Ç	)		
Entergy Consumptiom	2	6	5		
Timeliness/ External	1	3	3		
Public Support	4	1	2		
TOTAL Ranking	47	14	41		

Capital Budget Request Form				
Agency Number	580	Department Name	NORD	
Project Name	Citywide Lighting - HML and Pavilion	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?		
Project Address	Multiple Locations	Council District		
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repair of HML lighting in parks, athletic fields, and covered basketball pavilions.			
Five Year Summary	Repairs to damaged lighti	ng at NORDC facilities to improve sa	ifety 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 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.			
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? 2015,2016, 2017, 2018,or 2019?	2015, 2016, 2017, 2018, and 2019	
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 Prioirty Rating Form Agency Number** 580 **Department Name** NORD Citywide Lighting - HML and **Project Name Department Priority Ranking** Pavilion Categories Rating Score **Public Health and Safety** 12 **External Requirements** 6 **Protection of Capital Stock** 12 **Economic Development** 3 **Operating Budget** 9 Life Expectancy of Project 9 Percent of Population Served by 9 **Projects** Relation to dopted Plans 9 Intensity of Use 12 Scheduling 12 Benefit/ Cost 6 **Potential for Duplication** 3 Availability of Financing 3 **Special Need** 9 **Entergy Consumptiom** 6 Timeliness/ External 3 **Public Support** 4 12 **TOTAL Ranking**

45

135

Capital Budget Request Form					
Agency Number	580	Department Name	NORD		
Project Name	Donsereaux/Harrison Playground	Department Priority Ranking	13		
Project Type	Renovations: Building Improvements	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	3401 Misteltoe Street	Council District	С		
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.					
Five Year Summary	Renovation of existing facilities	Renovation of existing facilities at Donsereaux/Harrison 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.)	\$ 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.				
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? 2015,2016, 2017, 2018,or 2019?	2016		
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	580	Department Name	NORD	
Project Name	Donsereaux/Harrison Playground	Department Priority Ranking	1	
Categories	Rating	Sci	ore	
Public Health and Safety	4	1	2	
External Requirements	2	(	6	
Protection of Capital Stock	3		9	
Economic Development	1	:	3	
Operating Budget	3	9		
Life Expectancy of Project	3	9		
Percent of Population Served by Projects	2	6		
Relation to dopted 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			
Entergy Consumptiom	2			
Timeliness/ External	1			
Public Support	4	1	2	
TOTAL Ranking	43	1.	29	

Capital Budget Request Form				
Agency Number	580	Department Name	NORD	
Project Name	Joe W. Brown Park parking and lighting	Department Priority Ranking	19	
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.	Fracilities totaling 130 spots, acous to incline sitemork final drauing, concrete parking, clicus, stripping, 50 f.			
Five Year Summary	Impro	ove recreational facilities for public	usage	
Has an Architect or Engineer prepared drawings for this project?		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		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.			
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? 2015,2016, 2017, 2018,or 2019?	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	580	Department Name	NORD	
Project Name	Joe W. Brown Park parking and lighting	Department Priority Ranking	1	
Categories	Rating	Sco	ore	
Public Health and Safety	4	1	2	
External Requirements	2	(	ō	
Protection of Capital Stock	3	g	)	
Economic Development	1	5	3	
Operating Budget	2	(	õ	
Life Expectancy of Project	4	1	2	
rcent of Population Served by Proje	3	Ç	)	
Relation to dopted Plans	3	Ç	)	
Intensity of Use	4	1	2	
Scheduling	4	1	2	
Benefit/ Cost	2	6	5	
Potential for Duplication	1	3	3	
Availability of Financing	1	3	3	
Special Need	3	Ç	)	
Entergy Consumptiom	2	6	5	
Timeliness/ External	1	-	3	
Public Support	4	1	2	
TOTAL Ranking	44	13	32	

Capital Budget Request Form			
	Cupitai Dunget		
Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Lagoon, ecosystem, and ropes course repairs	Department Priority Ranking	11
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	5601 Read Rd.	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	shoreline including bulkheads and	em; install aeration system in lagoo appropriate vegetation; construct fi trails and picnic area; repair ropes o	shing piers, canoe/kayak launches,
Five Year Summary		of existing facilities at Joe W. Brown ment of best in calss Outdoors progr	
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.		
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? 2015,2016, 2017, 2018,or 2019?	2016 and 2017
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support		If no please discuss required improvements and estimated costs	

the intended use of the project?

Capital Budget Request Prioirty Rating Form			
Agency Number	580	Department Name	NORD
Project Name	Joe W. Brown Lagoon, ecosystem, and ropes course repairs	Department Priority Ranking	1
Categories	Rating	Sco	ore
Public Health and Safety	4	1	2
External Requirements	2	6	5
Protection of Capital Stock	4	1	2
Economic Development	1	3	3
Operating Budget	2		
Life Expectancy of Project	4		
Percent of Population Served by Projects	3		
Relation to dopted Plans	3		
Intensity of Use	4		
Scheduling	4	1	2
Benefit/ Cost	2	(	5
Potential for Duplication	3	g	)
Availability of Financing	1	3	3
Special Need	3		
Entergy Consumptiom	2	(	ō
Timeliness/ External	1		3
Public Support	4	1	
TOTAL Ranking	47	14	

Capital Budget Request Form				
Agency Number	580	Department Name	NORD	
Project Name	Joe W. Brown Victory Track HML and storage	Department Priority Ranking	10	
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 Rd.	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	
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.			
What Benefit(s) will be provided to Public from this project?	Increased athletic opportunity for local and regional events; imporved public safety.	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2016	
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 Prioirty Rating Form				
Agency Number	580	Department Name	NORD	
Project Name	Joe W. Brown Victory Track HML and storage	Department Priority Ranking	1	
Categories	Rating	Sc	ore	
Public Health and Safety	4	1	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 Projects	2		6	
Relation to dopted Plans	3		9	
Intensity of Use	4	1	12	
Scheduling	4	1	12	
Benefit/ Cost	2		6	
Potential for Duplication	1		3	
Availability of Financing	1		3	
Special Need	3		9	
Entergy Consumptiom	2		6	
Timeliness/ External	1		3	
Public Support	2		6	
TOTAL Ranking	39	1	17	

Capital Budget Request Form				
Agency Number	580	Department Name	NORD	
Project Name	Lemann Lafitte Greenway Playground	Department Priority Ranking	8	
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 Street @ N. Prieur St.	Council District	С	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Construction of restrooms, conce	ssions, storage facility; fencing; HM diamond, water fountain.	L, bleachers, little league baseball	
Five Year Summary		d facilities at Lafitte Greenway to al equipment, and an improved user o	-	
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.			
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? 2015,2016, 2017, 2018,or 2019?	2015	
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 Prioirty Rating Form				
Agency Number	580	Department Name	NORD	
Project Name	Lemann Lafitte Greenway Playground	Department Priority Ranking	1	
Categories	Rating	Sco	ore	
Public Health and Safety	4	1	2	
External Requirements	2	6	5	
Protection of Capital Stock	2	(	5	
Economic Development	1	3	3	
Operating Budget	2	6	5	
Life Expectancy of Project	4	1	2	
Percent of Population Served by Projects	3	Ç	)	
Relation to dopted Plans	3	Ç	)	
Intensity of Use	4	1	2	
Scheduling	4	1	2	
Benefit/ Cost	2	6	5	
Potential for Duplication	1	3	3	
Availability of Financing	1	3	3	
Special Need	3	Ç	)	
Entergy Consumptiom	2	6	5	
Timeliness/ External	1	3	3	
Public Support	4	1	2	
TOTAL Ranking	43	12	29	

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	50 meter Natatorium	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?	
Project Address		Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Construction of an indoor, Olympic size swimming pool, lockers, showers, restrooms.		
Five Year Summary	Provide year rou	and aqautics programming in the Ge	ntilly community
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.	\$ 200,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 12,000,000.00	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 also enable NORDC to deliver multi-use indoor/outdoor recreation centers and pools within 5 miles of every resident. This facility can attract regional competitive swim events.		
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? 2015,2016, 2017, 2018,or 2019?	2018 and 2019
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 Prioirty Rating Form Agency Number** 580 **Department Name** NORD **Project Name Department Priority Ranking** 50 meter Natatorium Categories Rating Score **Public Health and Safety** 12 **External Requirements** 6 **Protection of Capital Stock** 9 **Economic Development** 12 **Operating Budget** 3 Life Expectancy of Project 12 Percent of Population Served by 9 **Projects** Relation to dopted Plans 9 Intensity of Use 12 Scheduling 12 Benefit/ Cost 6 **Potential for Duplication** 9 **Availability of Financing** 3 **Special Need** 9 **Entergy Consumptiom** 6 Timeliness/ External 3 **Public Support** 9 **TOTAL Ranking**

47

141

Capital Budget Request Form				
Agency Number	580	Department Name	NORD	
Project Name	Pontchartrain Park athletics building	Department Priority Ranking	21	
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	Hayne Blvd near Congress St.	Council District	D	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Construction of restrooms, concessions, storage facility; fencing; water fountain			
Five Year Summary	Ongoing enhancement of Pontchartrain Park 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.)	\$ 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. 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.			
What Benefit(s) will be provided to Public from this project?	Increased athletic opportunity for local and regional events; imporved public safety.	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	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	580	Department Name	NORD
Project Name	Pontchartrain Park athletics building	Department Priority Ranking	1
Categories	Rating	Sco	ore
Public Health and Safety	4	1	2
External Requirements	2		5
Protection of Capital Stock	3	9	9
Economic Development	1	:	3
Operating Budget	2		5
Life Expectancy of Project	4	1	2
Percent of Population Served by Projects	3		9
Relation to dopted Plans	3		9
Intensity of Use	4	1	2
Scheduling	4	1	2
Benefit/ Cost	2		5
Potential for Duplication	1		3
Availability of Financing	1	:	3
Special Need	3	•	9
Entergy Consumptiom	2		5
Timeliness/ External	1		3
Public Support	3		9
TOTAL Ranking	43	1:	29

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	City wide Fencing	Department Priority Ranking	9
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 ballfields, 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		
What Benefit(s) will be provided to Public from this project?	Public safety	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015, 2016, and 2017
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	580	Department Name	NORD
Project Name	City wide Fencing	Department Priority Ranking	1
Categories	Rating	Sco	ore
Public Health and Safety	4	1	2
External Requirements	2	(	5
Protection of Capital Stock	4	1	2
Economic Development	1		3
Operating Budget	2		5
Life Expectancy of Project	4	1	2
Percent of Population Served by Projects	2	1	5
Relation to dopted Plans	3	,	9
Intensity of Use	4	1	2
Scheduling	4	1	2
Benefit/ Cost	2	1	5
Potential for Duplication	1	:	3
Availability of Financing	1	:	3
Special Need	3	(	)
Entergy Consumptiom	2	(	5
Timeliness/ External	1	-	3
Public Support	2	(	5
TOTAL Ranking	42	1:	26

Continue Double of France				
	Capital Budget Request Form			
Agency Number	580	Department Name	NORD	
Project Name	Security Cameras	Department Priority Ranking	1	
Project Type	Equipment	Is a Land acquisition needed?	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.			
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.	\$ 10,000.00	
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.			
What Benefit(s) will be provided to Public from this project?	Enhanced public safety	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015, 2016, 2017, and 2018	
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 Prioirty Rating Form** 580 NORD **Agency Number Department Name Project Name Department Priority Ranking** Security Cameras Categories Rating Score **Public Health and Safety** 4 **External Requirements** 2 6 **Protection of Capital Stock** 12 **Economic Development** 1 3 **Operating Budget** 4 12 Life Expectancy of Project 3 9 Percent of Population Served by 3 9 **Projects** Relation to dopted Plans 9 3 Intensity of Use 4 12 Scheduling 12 4 **Benefit/Cost** 6 2 **Potential for Duplication** 3 1 Availability of Financing 3 1 Special Need 9 3 **Entergy Consumptiom** 2 6 Timeliness/ External 3 **Public Support** 12 4 **TOTAL Ranking** 46 138

Capital Budget Request Form				
	capital bauget request form			
Agency Number	580	Department Name	NORD	
Project Name	Skelly Rupp Baseball Diamond	Department Priority Ranking	18	
Project Type	Renovations: Building Improvement	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	С	
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 Rup	p 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.			
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? 2015,2016, 2017, 2018,or 2019?	2017 and 2018	
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 Prioirty Rating Form Agency Number** 580 **Department Name** NORD **Project Name Department Priority Ranking** Skelly Rupp Baseball Diamond Categories Rating Score **Public Health and Safety** 12 **External Requirements** 6 **Protection of Capital Stock** 12 **Economic Development** 3 **Operating Budget** 12 Life Expectancy of Project 9 Percent of Population Served by 6 **Projects** Relation to dopted Plans 9 Intensity of Use 6 Scheduling 12 Benefit/ Cost 6 **Potential for Duplication** 3 **Availability of Financing** 3 **Special Need** 9 **Entergy Consumptiom** 9 Timeliness/ External 3 **Public Support** 9 **TOTAL Ranking**

43

129

Capital Budget Request Form			
Agency Number	580	Department Name	NORD
Project Name	St. Bernard Center	Department Priority Ranking	3
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	
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.)	\$ 6,000,000.00	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. Please note that due to condition of the facility, recreational programming has been extremely limited for the past year.		
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? 2015,2016, 2017, 2018,or 2019?	2015
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	580	Department Name	NORD	
Project Name	St. Bernard Center	Department Priority Ranking	1	
Categories	Rating	Sc	ore	
Public Health and Safety	4	1	.2	
External Requirements	2		6	
Protection of Capital Stock	4	1	.2	
Economic Development	1	:	3	
Operating Budget	3		9	
Life Expectancy of Project	4	1	.2	
Percent of Population Served by Projects	3		9	
Relation to dopted Plans	3		9	
Intensity of Use	4	1	.2	
Scheduling	4	1	.2	
Benefit/ Cost	2	1	6	
Potential for Duplication	1	:	3	
Availability of Financing	1	:	3	
Special Need	3	!	9	
Entergy Consumptiom	3		9	
Timeliness/ External	1		3	
Public Support	4	1	.2	
TOTAL Ranking	47	1-	41	

Capital Budget Request Form				
Agency Number	580	Department Name	NORD	
Project Name	Werner Playground	Department Priority Ranking	15	
Project Type	Renovations: Building Improvement	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 Hammon & 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			
Five Year Summary	Renovation of existing facilities	Renovation of existing facilities at Werner Playground to improve safety and user experience.		
Has an Architect or Engineer prepared drawings for this project?		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.			
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? 2015,2016, 2017, 2018,or 2019?	2016	
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** 580 **Department Name** NORD **Project Name Department Priority Ranking** Werner Playground Categories Rating Score **Public Health and Safety** 12 **External Requirements Protection of Capital Stock** 6 **Economic Development** 3 **Operating Budget** 9 Life Expectancy of Project 4 12 Percent of Population Served by 6 **Projects** Relation to dopted Plans 9 Intensity of Use 12 Scheduling 12 4 Benefit/ Cost 6 **Potential for Duplication** 3 1 **Availability of Financing** 3 1 **Special Need** 9 **Entergy Consumptiom** 9 Timeliness/ External 3 **Public Support** 9 **TOTAL Ranking**

43

129

	Capital Budget Request Form			
Agency Number	580	Department Name	NORD	
Project Name	Willie Hall	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	Milton St. @ Cadillac	Council District	D	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	uirements, fountains; 80 yard multi-purpose football field; little league baseball diamond, backstops, fencing,			
Five Year Summary	To replace pre-existing playground	d and amenities, lost due to the new schoool	construction of John Mac 35 high	
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.)	\$ 2,500,000.00	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 ac surrounding community.	dequate facilities to serve the genera	al public and population of the	
What Benefit(s) will be provided to Public from this project?	New construction will replace services lost to the community	For what year are you requesting the Project? 2015,2016, 2017, 2018,or 2019?	2015	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	No	If no please discuss required improvements and estimated costs		

Capital Budget Request Prioirty Rating Form				
Agency Number	580	Department Name	NORD	
Project Name	Willie Hall	Department Priority Ranking	1	
Categories	Rating	Sci	ore	
Public Health and Safety	4	1	2	
External Requirements	2		5	
Protection of Capital Stock	3		9	
Economic Development	1		3	
Operating Budget	1		3	
Life Expectancy of Project	4	1	2	
Percent of Population Served by Projects	2		5	
Relation to dopted Plans	3		9	
Intensity of Use	4	1	2	
Scheduling	4	1	2	
Benefit/ Cost	2	ı	5	
Potential for Duplication	1	;	3	
Availability of Financing	1		3	
Special Need	3		Э	
Entergy Consumptiom	3		9	
Timeliness/ External	1		3	
Public Support	3		9	
TOTAL Ranking	42	1.	26	

## **Capital Budget Request Form**

Agency Number	580	Department Name	NORDC
Project Name	Treme Recreation Center Elevator	Department Priority Ranking	7
Project Type	Renovations: Building Improvement	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	С
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	If yes please provide estimate of increase in operating costs.	
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 adequal surrounding community, especially those make the recreation center ADA complia members.	e with physical challenges int and thus allow full acc	. The installation of the elevator will
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? 2015,2016, 2017, 2018.or 2019?	2015
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	580	Department Name NORD	
Project Name	Treme Recreation Center Elevator	Department Priority Ranking	1
Categories	Rating		core
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 Projects	2		6
Relation to dopted 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
Entergy Consumptiom	2		6
Timeliness/ External	1		3
Public Support	4		12
TOTAL Ranking	44		132

# **Capital Budget Request Form**

Agency Number	580	Department Name	NORDC
Project Name	Richard Lee Playground	Department Priority Ranking	22
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 R	ichard Lee playground	
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)	Yes	If yes please provide estimate of increase in operating costs.	50,000.00
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 4,600,000.00	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 adequar surrounding community. This will also pr to the surrounding neighborhoods.	ovide recreational oppor	eneral public and population of the tunities appropriate to the demographics
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? 2015,2016, 2017, 2018.or 2019?	2018 and 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	580		NORD
Project Name	Richard Lee 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 Projects	3		9
Relation to dopted 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
Entergy Consumptiom	2		6
Timeliness/ External	1		3
Public Support	4		12
TOTAL Ranking	43		129

Capital Budget Request Form				
Agency Number	580	Department Name	NORD	
Project Name	Playground	Department Priority Ranking	14	
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?		
Project Address	1151 Esplanade Avenue	Council District	С	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Development and construction of nev	w playground		
Five Year Summary	Provide pla	ayground in French Quarter area of Ne	ew Orleans.	
Has an Architect or Engineer prepared drawings for this project?		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	If yes please provide estimate of increase in 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.		
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? 2015,2016, 2017, 2018,or 2019?	2016	
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	580	Department Name	NORD
Project Name	Playground	Department Priority Ranking	1
Categories	Rating	Sco	ore
Public Health and Safety	4	1	2
External Requirements	2	6	)
Protection of Capital Stock	2	6	5
Economic Development	1	3	3
Operating Budget	2	6	5
Life Expectancy of Project	4	1	2
Percent of Population Served by Projects	3	g	)
Relation to dopted Plans	3	g	)
Intensity of Use	4	1	2
Scheduling	4	1	2
Benefit/ Cost	2	6	
Potential for Duplication	1	3	}
Availability of Financing	1	3	3
Special Need	3	g	)
Entergy Consumptiom	2	$\epsilon$	5
Timeliness/ External	1	3	3
Public Support	4	1	2
TOTAL Ranking	43	12	29

Blank		Blank	Blank	Blank	
New					
Construction	1	Yes	Α		1
Renovation		No	В		2
Repairs			С		3
Upgrade			D		4
Feasability					
Study			E		
Equipment					
Blank	210 220 230 250 360 380 380 450 550 620 630 640 655 670 685 670 770 781 782	Blank City Council Mayors Office Chief Administrative Office Law NOFD NOPD Sanitation Health Welfare Retirement Finance Property Management DPW Utilities NORD Unattaced Boards and Com Parks and Parkways Library Historic Distisct and Landm Vieux Carre Commision Alcohol and Beverage City Planning Moquito Control NOMA Misc General Services Housing Urban Developme Training Division Economic Development Neighborhood Housing Intergovermental	nmisions arks Commission		

- 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 Judical 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 Distisct 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 Registar of Voters

880 Judical Retirement

890 Enterprise Funds

892 French Market

893 Upper Porta

- 894 Delgado Plantation
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