	2016- 2020 Capital Budget Request Form								
Department									
Agency									
Number	210	Contact Name							
Department									
Name	Mayors Office	Contact Number							
Date		Contact E-Mail							
	Department	Prioirty Criteria		Project					
Request #	Ranking	Ranking	Project Name	Amount	2016	2017	2018	2019	2020
1	1	96	SOUTH COTTAGE	############	\$ 1,229,910.00	\$-	\$-	\$-	\$-
2	3	0	North Cottage	############	\$-	\$-	###########	\$-	\$-
3	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
4	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
5	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
6	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
7	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
8	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
9	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
10	0	0	0	\$-	\$-	\$-	\$-	\$-	\$-
TOTAL				############	\$ 1,229,910.00	\$-	############	\$-	\$-

Department Head

Signature Printed Name

Date

	Capital Budget Request Form					
Agency Number	210	Department Name	Mayors Office			
Project Name	SOUTH COTTAGE Buildout Milne Boy's Home for NOLA FOR LIFE	Department Priority Ranking	1			
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	5420 Filmore Avenue, New Orleans, LA 70122	Council District	с			
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	South Cottage Buildout: South Cottage renovation includes build out to accommodate nonprofuit organizations to provide services to youth. This phase is estimated to be \$1,229,910					
Five Year Summary	2015: Milne Gymnasium buildout: \$660,000.00 <u>2016:Milne Gymnasium Soutl</u> Prevention	n <u>Cottage Renovation- NOLA FOR LIFE-</u> ) Programs- \$1,767,480.00	\$1,229,910.00 2017: North Cottage: Youth Violence			
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.	TBD			
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,229,910.00	Proposed Funding Source	General Obligation Bonds			
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:	Milne Boys Home build-out for NOLA FOR LIFE conforms with the	objectives of the City's Master Plan as it	is an apaptive reuse of an existing 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.		No				
What Benefit(s) will be provided to Public from this project?	Milne will provide a central location for young members of the New Orleans community to participate in programs that support NOLA FOR LIFE, Mayor Landrieu's murder reduction strategy. Programs operated at Milne Boys Home will benefit the public by doing one of the following 1) reduce involvement in violence among youth; 2) promote pro-social behavior; 3) build strong peer and positive adult relationships; 4) provide a safe space for the care and education of youth; and/or 5) provide educational, after-school, and community programs for disconnected and at-risk youth	No For what year are you requesting t 2016 2017 2018 2019 2019 2020	he Project? 2016,2017, 2018, 2019,or 2020? Enter \$1,229,910.00			
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 Prioirty Rating Form					
Agency Number	210	Department Name	Mayors Office		
Project Name	SOUTH COTTAGE Buildout Milne Boy's Home for NOLA FOR LIFE	Department Priority Ranking	1		
Categories	Rating		Score		
Public Health and Safety	3		9		
External Requirements	1		3		
Protection of Capital Stock	2		6		
Economic Development	3		9		
Operating Budget	1		3		
Life Expectancy of Project	1		3		
Percent of Population Served by Projects	1		3		
Relation to dopted Plans	1		3		
Intensity of Use	3		9		
Scheduling	3		9		
Benefit/ Cost	3		9		
Potential for Duplication	2		6		
Availability of Financing	1		3		
Special Need	2		6		
Entergy Consumptiom	1		3		
Timeliness/ External	3		9		
Public Support	1		3		
Environmental Quality and Stormwater Management	1		3		
TOTAL Ranking	33		95		

Capital Budget Request Form					
Agency Number	210	Department Name	Mayors Office		
Project Name	North Cottage Buildout at Milne Boys Home	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?	Yes		
Project Address	5249 Filmore Avenue, New Orleans, LA 70122	Council District	c		
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	North Cottage Buildout: To provide	office and traning areas for NOLA FOR LI	E and Youth Violence Prevention Programs.		
Five Year Summary	2015: Milne Gymnasium buildout: \$660,000.00 2016:Milne Gymnasium South Cottage Renovation- NOLA FOR LIFE- \$1,229,910.00 <u>2017:</u> North Cottage: Youth Violence Prevention Programs- \$1,767,480.00				
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.	TBD		
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$1,767,480	Proposed Funding Source	General Obligation Bonds		
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:	Milne Boys Home build-out for NOLA FOR LIFE conforms with the objectives of the City's Master Plan as it is an apaptive reuse of an existing 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.		No			
	Milne will provide a central location for young members of the New Orleans community to participate in programs that support NOLA		roject? 2016,2017, 2018, 2019,or 2020? Enter amount \$ 1,767,480.00		

What Benefit(s) will be provided to Public from this project?	FOR LIFE, Mayor Landrieu's murder reduction strategy. Programs operated at Milne Boys Home will benefit the public by doing one of the following 1) reduce involvement in violence among youth; 2) promote pro-social behavior; 3) build strong peer and positive adult relationships; 4) provide a safe space for the care and education of youth; and/or 5) provide educational, after-school, and community programs for disconnected and at- risk youth		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the	Yes	If no please discuss required improvements and estimated costs	

	Capital Budget Request Prioirty Rating Form					
Agency Number	210	Department Name	Mayors Office			
Project Name	North Cottage Buildout at Milne Boys Home	Department Priority Ranking	3			
Categories	Rating		Score			
Public Health and Safety	3		9			
External Requirements	1		3			
Protection of Capital Stock	2		6			
Economic Development	3		9			
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	3		9			
Scheduling	3		9			
Benefit/ Cost	3		9			
Potential for Duplication	2		6			
Availability of Financing	1		3			
Special Need	2		6			
Entergy Consumptiom	1		3			
Timeliness/ External	3		9			
Public Support Environmental Quality and	1		3			
Stormwater Management	1		3			
TOTAL Ranking	33		96			

	Capital Bud	get Request Form	
Agency Number	Blank	Department Name	Blank
Project Name		Department Priority Ranking	
Project Type		Is a Land acquisition needed? (Y/N)	
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?	
Project Address		Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.			
Five Year Summary			
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)		Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:			
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?		For what year are you requesting the P 2016 2017 2018 2019 2020	roject? 2016,2017, 2018, 2019,or 2020? Enter amount
Is the surrounding intrastructure(i.e. utilities, road network) sufficient to support the intended use of the		If no please discuss required improvements and estimated costs	

	Capital Budget Request Prioirty Rating Form				
Agency Number	Blank	Department Name	Blank		
Project Name	0	Department Priority Ranking	1		
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 Environmental Quality and	1		3		
Stormwater Management	1		3		
TOTAL Ranking	18		51		

	Capital Budget Request Form					
Agency Number	Blank	Department Name	Blank			
Project Name		Department Priority Ranking				
Project Type		Is a Land acquisition needed? (Y/N)				
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?				
Project Address		Council District				
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.						
Five Year Summary						
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)		Please provide estimate of increase or decrease operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:						
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?		For what year are you requesting the P 2016 2017 2018 2019 2020	roject? 2016,2017, 2018, 2019,or 2020? Enter amount			
Is the surrounding intrastructure(i.e. utilities, road network) sufficient to support the intended use of the		If no please discuss required improvements and estimated costs				

	Capital Budget Request Prioirty Rating Form				
Agency Number	Blank	Department Name	Blank		
Project Name	0	Department Priority Ranking	1		
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 Environmental Quality and	1		3		
Stormwater Management	1		3		
TOTAL Ranking	18		51		

	Capital Budget Request Form					
Agency Number	Blank	Department Name	Blank			
Project Name		Department Priority Ranking				
Project Type		Is a Land acquisition needed? (Y/N)				
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?				
Project Address		Council District				
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.						
Five Year Summary						
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)		Please provide estimate of increase or decrease operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:						
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?		For what year are you requesting the P 2016 2017 2018 2019 2020	roject? 2016,2017, 2018, 2019,or 2020? Enter amount			
Is the surrounding intrastructure(i.e. utilities, road network) sufficient to support the intended use of the		If no please discuss required improvements and estimated costs				

	Capital Budget Request Prioirty Rating Form				
Agency Number	Blank	Department Name	Blank		
Project Name	0	Department Priority Ranking	1		
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 Environmental Quality and	1		3		
Stormwater Management	1		3		
TOTAL Ranking	18		51		

Capital Budget Request Form			
Agency Number	Blank	Department Name	Blank
Project Name		Department Priority Ranking	
Project Type		Is a Land acquisition needed? (Y/N)	
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?	
Project Address		Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.			
Five Year Summary			
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)		Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:			
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?		For what year are you requesting the P 2016 2017 2018 2019 2020	roject? 2016,2017, 2018, 2019,or 2020? Enter amount
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	Blank	Department Name	Blank
Project Name	0	Department Priority Ranking	1
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 Environmental Quality and	1		3
Stormwater Management	1		3
TOTAL Ranking	18		51

Capital Budget Request Form			
Agency Number	Blank	Department Name	Blank
Project Name		Department Priority Ranking	
Project Type		Is a Land acquisition needed? (Y/N)	
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?	
Project Address		Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.			
Five Year Summary			
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)		Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:			
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?		For what year are you requesting the P 2016 2017 2018 2019 2020	roject? 2016,2017, 2018, 2019,or 2020? Enter amount
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	Blank	Department Name	Blank
Project Name	0	Department Priority Ranking	1
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 Environmental Quality and	1		3
Stormwater Management	1		3
TOTAL Ranking	18		51

	Capital Budget Request Form			
Agency Number	Blank	Department Name	Blank	
Project Name		Department Priority Ranking		
Project Type		Is a Land acquisition needed? (Y/N)		
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?		
Project Address		Council District		
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.				
Five Year Summary				
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)		Please provide estimate of increase or decrease operating costs.		
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:				
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?		For what year are you requesting the P 2016 2017 2018 2019 2020	roject? 2016,2017, 2018, 2019,or 2020? Enter amount	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the		If no please discuss required improvements and estimated costs		

Capital Budget Request Prioirty Rating Form			
Agency Number	Blank	Department Name	Blank
Project Name	0	Department Priority Ranking	1
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 Environmental Quality and	1		3
Stormwater Management	1		3
TOTAL Ranking	18		51

Capital Budget Request Form			
Agency Number	Blank	Department Name	Blank
Project Name		Department Priority Ranking	
Project Type		Is a Land acquisition needed? (Y/N)	
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?	
Project Address		Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.			
Five Year Summary			
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)		Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:			
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?		For what year are you requesting the P 2016 2017 2018 2019 2020	roject? 2016,2017, 2018, 2019,or 2020? Enter amount
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the		If no please discuss required improvements and estimated costs	

Capital Budget Request Prioirty Rating Form			
Agency Number	Blank	Department Name	Blank
Project Name	0	Department Priority Ranking	1
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 Environmental Quality and	1		3
Stormwater Management	1		3
TOTAL Ranking	18		51

	Capital Budget Request Form			
Agency Number	Blank	Department Name	Blank	
Project Name		Department Priority Ranking		
Project Type		Is a Land acquisition needed? (Y/N)		
Will this project be a permanent immovable improvement?		Does the request meet the General Obligation Bond requirement?		
Project Address		Council District		
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.				
Five Year Summary				
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)		Please provide estimate of increase or decrease operating costs.		
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)		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:				
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.				
		For what year are you requesting the P 2016 2017	roject? 2016,2017, 2018, 2019,or 2020? Enter amount	
What Benefit(s) will be provided to Public from this project?		2018 2019 2020		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project2		If no please discuss required improvements and estimated costs		

Capital Budget Request Prioirty Rating Form			
Agency Number	Blank	Department Name	Blank
Project Name	0	Department Priority Ranking	1
Categories	Rating	ſ	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
Environmental Quality and Stormwater Management	1		3
TOTAL Ranking	18		51

Dlank	Dlank	Diank	Blank	
Blank New	Blank	Blank	ыапк	
Construction	Yes	А		1
Renovation	No	В		2
Repairs		С		3
Upgrade		D		4
Feasability				
Study		E		
Equipment				
Blank	Blank200City Council210Mayors Office220Chief Administrative Of230Law250NOFD270NOPD300Sanitation360Health380Welfare399Retirement400Finance450Property Management500DPW500Utilities580NORD600Unattaced Boards and O620Parks and Parkways630Library640Historic Distisct and Lar650Vieux Carre Commision655Alcohol and Beverage670City Planning685Moquito Control689NOMA700Misc710General Services750Housing Urban Develop770Training Division781Economic Development792Neighborhood Housing799Intergovermental	Commisions ndmarks 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 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

Blank

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