

# Routt County Capital Improvement Plan Request Form

**Project**

Project Title

Description:

**Fund:** |  
**Dept:**  
**Est. Comp Date:**

**Location:**  
**Grant**  
**Eligible:**  
**Priority:**

Enter Photo

**Purpose:**

**Background/Justification: narrative addressing**

**principles stated in CIP Section 7 Establishing CIP Priorities including Cost Savings Benefit over Life Span of Capital Improvement and Operational costs:**

	2017	2018	2019	2020	2021	Future TBD
Project Title						
Capital Cost		-				\$
Grant or Other Revenue						
Total Project Cost	\$			\$ -	\$ -	\$
Operating Cost						
<b>Itemized Summary</b>	<b>Cost</b>		<b>Schedule</b>			<b>Grant Summary</b>
Planning / Design	\$					Grants Available
ROW/ Acquisition	\$	-				Grants Due
Construction	\$					Grants Awarded
Furniture/ Equipment	\$	-				Grant Amount
						Match Amount

**CIP Evaluation Points and Ranking and EMT Notes**