

Town of East Lyme

Dept. BOE

Capital Expenditure Project Funding Request form 2026-27

Priority

of

Project Name Technology - Annual Recapitalization

Please Describe the Project (What is it, where will it be, who will use it, etc.):

This project funds the annual recapitalization of various technology needs throughout the district including major hardware, software, and licensing needs. The majority of these funds are used on an annual basis to outfit students with their initial devices in Kindergarten, Fifth Grade, and Ninth Grade. Once outfitted, students retain the same

How will this capital project effect the efficiency and effectiveness of the town government?

This is an annually recurring project. Current and functional technology and related infrastructure is a requirement for the present and conceivable future classroom. Failure to meet these needs would produce students poorly prepared for the next stage of their lives.

Project or Expenditure Cost:	Estimate Useful Life	
Purchase price/construction costs		\$ 500,000
Less: Proceeds of Disposal of Asset		\$ -
Additional Costs (paid during YE 2027):		
Other Costs		
Total Cost for YE 2027		\$ 500,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8

Describe the future costs and how they compare to the costs without this project:

Annual funding needs are expected to remain neutral over the next several years based on industry projections.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

	Y	N	NA	More
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Define the Need:

1 Do we need to do this for HEALTH and SAFETY reasons?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Is this required under LAWS or REGULATIONS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Is this ABSOLUTELY CRITICAL to the functioning of the department?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Can this project WAIT FOR ANOTHER YEAR if we had to?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Was this included in your 10-YEAR PLAN as is? Provide details if No	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Has all or part of this been requested IN THE PAST? Provide details if Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Define the Benefit:

7 Will this IMPROVE PRODUCTIVITY or REDUCE COST? Describe how	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Will this help us MAKE BETTER USE of our assets?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Will funding this now help to avoid A MORE COSTLY EXPENDITURE?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Costs and Procurement:

10 Sealed bid?		State bid?		Or Other?		Historical costs of previous phases	
Please attach how your numbers were derived (i.e. quote, catalog, etc.)							<input type="checkbox"/>
Please attach a copy of the procurement specifications, if readily available							<input type="checkbox"/>
11 Can the project be done with a PUBLIC/PRIVATE partnership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12 Are there GRANT opportunities? Describe	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13 Can you SHARE with other departments (including BoE)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14 Can you SHARE with other governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Supplemental Information:

15 What are the ALTERNATIVES to this project? Or describe why none.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Are there ADDITIONAL DETAILS that should be known? Describe	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Town of East Lyme

Capital Expenditure Project Funding Request form 2026-2027

Project Name

ELMS Roof Life Extension/Restoration Phase 6

Dept.

Priority

BOE

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of

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Please Describe the Project (What is it, where will it be, who will use it, etc.):

Project entails application of a protective coating to the Middle School roof to extend the asset's life at a fraction of the cost of roof replacement. This is the sixth and final phase of this project. This phase will coat the remaining two sections of roof. It is advantageous to finish these two sections this year while the condition of both existing

How will this capital project effect the efficiency and effectiveness of the town government?

Extends the life of the serviced roof area for a minimum warranty period of 20 years (effectiveness) at approximately 1/3 the cost of replacing the roof (efficiency).

Project or Expenditure Cost:	Estimate Useful Life	
Purchase price/construction costs		\$ 750,000
Less: Proceeds of Disposal of Asset		\$ -
Additional Costs (paid during YE 2027):		
Other Costs		
Total Cost for YE 2027		\$ 750,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8

Describe the future costs and how they compare to the costs without this project:

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

	Y	N	NA	More
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Define the Need:

1 Do we need to do this for HEALTH and SAFETY reasons?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Is this required under LAWS or REGULATIONS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Is this ABSOLUTELY CRITICAL to the functioning of the department?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Can this project WAIT FOR ANOTHER YEAR if we had to?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Was this included in your 10-YEAR PLAN as is? Provide details if No	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Has all or part of this been requested IN THE PAST? Provide details if Yes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Define the Benefit:

7 Will this IMPROVE PRODUCTIVITY or REDUCE COST? Describe how	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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9 Will funding this now help to avoid A MORE COSTLY EXPENDITURE?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Costs and Procurement:

10 Sealed bid?		State bid?		Or Other?	Historical costs of previous phases
Please attach how your numbers were derived (i.e. quote, catalog, etc.)					
Please attach a copy of the procurement specifications, if readily available					
11 Can the project be done with a PUBLIC/PRIVATE partnership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 Are there GRANT opportunities? Describe	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13 Can you SHARE with other departments (including BoE)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Can you SHARE with other governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Supplemental Information:

15 What are the ALTERNATIVES to this project? Or describe why none.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Are there ADDITIONAL DETAILS that should be known? Describe	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Town of East Lyme

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BOE

**Capital Expenditure Project Funding Request form 2026-27**

Priority

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of

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Project Name **ELMS HVAC Recapitalization Phase 6**

Please Describe the Project (What is it, where will it be, who will use it, etc.):

The major air handling components of the MS HVAC system are greater than 20 years old, and they are at the end of their design service life. This project continues ongoing recapitalization of the units in phases instead of absorbing the costs and conducting the work during one year.

How will this capital project effect the efficiency and effectiveness of the town government?

Replaces aging infrastructure with new, reliable equipment with much less downtime (effectiveness). New units are more energy efficient and less maintenance intensive/costly.(efficiency).

Project or Expenditure Cost:

Estimate Useful Life

20

Purchase price/construction costs

\$ 350,000

Less: Proceeds of Disposal of Asset

\$ -

Additional Costs (paid during YE 2027):

Other Costs

Total Cost for YE 2027

\$ 350,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1

Year 2

Year 3

Year 4

Year 5

Year 6

Year 7

Year 8

Describe the future costs and how they compare to the costs without this project:

Currently installed equipment is less energy efficient and requires increasing numbers of repairs and maintenance. New equipment is more efficient and warranted from repairs for several years.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

Y N NA More

**Define the Need:**

- 1 Do we need to do this for HEALTH and SAFETY reasons?
- 2 Is this required under LAWS or REGULATIONS?
- 3 Is this ABSOLUTELY CRITICAL to the functioning of the department?
- 4 Can this project WAIT FOR ANOTHER YEAR if we had to?
- 5 Was this included in your 10-YEAR PLAN as is? Provide details if No
- 6 Has all or part of this been requested IN THE PAST? Provide details if Yes

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Define the Benefit:**

- 7 Will this IMPROVE PRODUCTIVITY or REDUCE COST? Describe how
- 8 Will this help us MAKE BETTER USE of our assets?
- 9 Will funding this now help to avoid A MORE COSTLY EXPENDITURE?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Costs and Procurement:**

10 Sealed bid? ☐ State bid? ☐ Or Other? ☐ Historical costs of previous phases ☐

Please attach how your numbers were derived (i.e. quote, catalog, etc.)

Please attach a copy of the procurement specifications, if readily available

- 11 Can the project be done with a PUBLIC/PRIVATE partnership?
- 12 Are there GRANT opportunities? Describe
- 13 Can you SHARE with other departments (including BoE)?
- 14 Can you SHARE with other governments?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Supplemental Information:**

- 15 What are the ALTERNATIVES to this project? Or describe why none.
- 16 Are there ADDITIONAL DETAILS that should be known? Describe

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Town of East Lyme

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Capital Expenditure Project Funding Request form 2026-27

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Project Name School Indoor Air Quality Inspections

Please Describe the Project (What is it, where will it be, who will use it, etc.):

Recently enacted state law requires all schools receive a comprehensive indoor air quality inspection once every five years. Since this is a new law, the statute allows school districts to complete 20% of its schools each year for the first five years instead of having to do all of them at once. The legislation was approved in CY23 and modified

How will this capital project effect the efficiency and effectiveness of the town government?

This is a regulatory requirement. The inspections may identify deficiencies that when corrected or addressed will result in better operation of equipment and lower costs. (effectiveness). (efficiency). This is an unfunded state mandate. We will need to account for reinspections in the operating budget. It is also unclear at this time, how the

Project or Expenditure Cost: Estimate Useful Life 20

Purchase price/construction costs

\$ 24,120

Less: Proceeds of Disposal of Asset

\$ -

Additional Costs (paid during YE 2027):

Other Costs

Total Cost for YE 2027

\$ 24,120

Project Operation and Maintenance costs (Any future costs associated with this request)							
Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8

Describe the future costs and how they compare to the costs without this project:

Currently installed equipment is less energy efficient and requires increasing numbers of repairs and maintenance. New equipment is more efficient and warranted from repairs for several years.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

	Y	N	NA	More
<b>Define the Need:</b>				
1 Do we need to do this for HEALTH and SAFETY reasons?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Is this required under LAWS or REGULATIONS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Is this ABSOLUTELY CRITICAL to the functioning of the department?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Can this project WAIT FOR ANOTHER YEAR if we had to?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Was this included in your 10-YEAR PLAN as is? Provide details if No	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Has all or part of this been requested IN THE PAST? Provide details if Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Define the Benefit:</b>				
7 Will this IMPROVE PRODUCTIVITY or REDUCE COST? Describe how	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Will this help us MAKE BETTER USE of our assets?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Will funding this now help to avoid A MORE COSTLY EXPENDITURE?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Costs and Procurement:</b>				
10 Sealed bid? State bid? Or Other? Historical costs of previous phases				
Please attach how your numbers were derived (i.e. quote, catalog, etc.)				<input type="checkbox"/>
Please attach a copy of the procurement specifications, if readily available				<input type="checkbox"/>
11 Can the project be done with a PUBLIC/PRIVATE partnership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Are there GRANT opportunities? Describe	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Can you SHARE with other departments (including BoE)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Can you SHARE with other governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Supplemental Information:</b>				
15 What are the ALTERNATIVES to this project? Or describe why none.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Are there ADDITIONAL DETAILS that should be known? Describe	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Town of East Lyme

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BOE

**Capital Expenditure Project Funding Request form 2026-27**

Priority

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of

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Project Name Haynes Elementary- Hallway Floor Moisture Mitigation

Please Describe the Project (What is it, where will it be, who will use it, etc.):

Remove tile floor, apply epoxy waterproof sealant to underlying slab and retile hallway sections at Haynes School. Existing floor tiles are delaminating in affected areas which create trip hazards and incur repair costs.

How will this capital project effect the efficiency and effectiveness of the town government?

Eliminates ongoing repairs of broken and delaminating tiles (efficiency) and provides safe, unencumbered walking and working surfaces for staff and students (effectiveness).

Project or Expenditure Cost:

Estimate Useful Life

Purchase price/construction costs

\$ 50,000

Less: Proceeds of Disposal of Asset

\$ -

Additional Costs (paid during YE 2027):

Other Costs

Total Cost for YE 2027

\$ 50,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1

Year 2

Year 3

Year 4

Year 5

Year 6

Year 7

Year 8

Describe the future costs and how they compare to the costs without this project:

O&M costs will decrease by elimination of ongoing repairs.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

Y N NA More

**Define the Need:**

- 1 Do we need to do this for HEALTH and SAFETY reasons?
- 2 Is this required under LAWS or REGULATIONS?
- 3 Is this ABSOLUTELY CRITICAL to the functioning of the department?
- 4 Can this project WAIT FOR ANOTHER YEAR if we had to?
- 5 Was this included in your 10-YEAR PLAN as is? Provide details if No
- 6 Has all or part of this been requested IN THE PAST? Provide details if Yes

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Define the Benefit:**

- 7 Will this IMPROVE PRODUCTIVITY or REDUCE COST? Describe how
- 8 Will this help us MAKE BETTER USE of our assets?
- 9 Will funding this now help to avoid A MORE COSTLY EXPENDITURE?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Costs and Procurement:**

10 Sealed bid? State bid? 25000 Or Other?

Please attach how your numbers were derived (i.e. quote, catalog, etc.)

Please attach a copy of the procurement specifications, if readily available

11 Can the project be done with a PUBLIC/PRIVATE partnership?

12 Are there GRANT opportunities? Describe

13 Can you SHARE with other departments (including BoE)?

14 Can you SHARE with other governments?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Supplemental Information:**

15 What are the ALTERNATIVES to this project? Or describe why none.

16 Are there ADDITIONAL DETAILS that should be known? Describe

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Town of East Lyme

Dept. BOE

Capital Expenditure Project Funding Request form 2026-27

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Project Name EL High School HVAC Recapitalization Phase 6

Please Describe the Project (What is it, where will it be, who will use it, etc.):

The major air handling components of the HS HVAC system are at the end of design service life with ages ranging from 20 to 30+ years. This project spreads out the recapitalization of the units 10-12 years. Depending on actual individual equipment condition, work could range from recapitalization of major components (such as coils, VAV

How will this capital project effect the efficiency and effectiveness of the town government?

Replaces aging infrastructure with new, reliable equipment with much less downtime (effectiveness). New units are more energy efficient and less maintenance intensive/costly.(efficiency).

Project or Expenditure Cost: Estimate Useful Life 20

Purchase price/construction costs

\$ 300,000

Less: Proceeds of Disposal of Asset

\$ -

Additional Costs (paid during YE 2027):

Other Costs

Total Cost for YE 2027

\$ 300,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8

Describe the future costs and how they compare to the costs without this project:

Currently installed equipment is less energy efficient and requires increasing numbers of repairs and maintenance. New equipment is more efficient and warranted from repairs for several years.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

	Y	N	NA	More
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Define the Need:

1 Do we need to do this for HEALTH and SAFETY reasons?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Costs and Procurement:

10 Sealed bid?		State bid?		Or Other?	Historical costs of previous phases	
Please attach how your numbers were derived (i.e. quote, catalog, etc.)						<input type="checkbox"/>
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13 Can you SHARE with other departments (including BoE)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 Can you SHARE with other governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Supplemental Information:

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16 Are there ADDITIONAL DETAILS that should be known? Describe	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please Describe the Project (What is it, where will it be, who will use it, etc.):

The HS exterior boiler room was built and commissioned in 2010/2011. The building contains two traditional large hot water boilers and three condensing boilers. The life expectancy of the mechanical components on these units (burners, pumps, drives) is fifteen years. To provide proper heating, cooling and dehumidification, the boilers

How will this capital project effect the efficiency and effectiveness of the town government?

This project will review operating parameters, review the current design, and update/remove/replace equipment as required to ensure continued and efficient operation. Replaces aging infrastructure with new, reliable equipment (effectiveness). New componenets and configuration are more energy efficient and less maintenance

Project or Expenditure Cost:	Estimate Useful Life	20	
Purchase price/construction costs		\$	250,000
Less: Proceeds of Disposal of Asset		\$	-
Additional Costs (paid during YE 2027):			
Other Costs			
Total Cost for YE 2027		\$	250,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8

Describe the future costs and how they compare to the costs without this project:

Currently installed equipment and configuration is less energy efficient and aging. New equipment is more efficient and will be optimally configured to reduce energy use.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

	Y	N	NA	More
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Define the Need:

- 1 Do we need to do this for HEALTH and SAFETY reasons?
- 2 Is this required under LAWS or REGULATIONS?
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<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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- 9 Will funding this now help to avoid A MORE COSTLY EXPENDITURE?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Costs and Procurement:

10 Sealed bid? State bid? Or Other?

Please attach how your numbers were derived (i.e. quote, catalog, etc.)

Please attach a copy of the procurement specifications, if readily available

11 Can the project be done with a PUBLIC/PRIVATE partnership?

12 Are there GRANT opportunities? Describe

13 Can you SHARE with other departments (including BoE)?

14 Can you SHARE with other governments?

		<input type="checkbox"/>	
		<input type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Supplemental Information:

15 What are the ALTERNATIVES to this project? Or describe why none.

16 Are there ADDITIONAL DETAILS that should be known? Describe

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Town of East Lyme

Capital Expenditure Project Funding Request form 2026-2027

Project Name

ELHS Cooling Tower Recapitalization

Dept.

Priority

BOE

7

of

8

Please Describe the Project (What is it, where will it be, who will use it, etc.):

The primary cooling tower for the HS HVAC system has reached mid-life and requires a comprehensive overhaul to ensure its ongoing efficiency and operation. Additionally, updating controls and pumps/drives to newer technology will further improve the efficiency and reduce the energy consumption. During this work, we will also investigate

How will this capital project effect the efficiency and effectiveness of the town government?

Recapitalizes aging infrastructure with new equipment and reconfigures to provide redundancy and higher operational availability (effectiveness) while making th system more energy efficient and less maintenance intensive/costly.(efficiency).

Project or Expenditure Cost:

Estimate Useful Life

20

Purchase price/construction costs

\$

65,000

Less: Proceeds of Disposal of Asset

\$

-

Additional Costs (paid during YE 2027):

Other Costs

Total Cost for YE 2027

\$

65,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8

Describe the future costs and how they compare to the costs without this project:

Currently installed equipment is less energy efficient and requires increasing numbers of repairs and maintenance. New equipmentconfiguration is more efficient and provides redundancy in event of failure.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

Y	N	NA	More
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Define the Need:

- 1 Do we need to do this for HEALTH and SAFETY reasons?
- 2 Is this required under LAWS or REGULATIONS?
- 3 Is this ABSOLUTELY CRITICAL to the functioning of the department?
- 4 Can this project WAIT FOR ANOTHER YEAR if we had to?
- 5 Was this included in your 10-YEAR PLAN as is? Provide details if No
- 6 Has all or part of this been requested IN THE PAST? Provide details if Yes

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Define the Benefit:

- 7 Will this IMPROVE PRODUCTIVITY or REDUCE COST? Describe how
- 8 Will this help us MAKE BETTER USE of our assets?
- 9 Will funding this now help to avoid A MORE COSTLY EXPENDITURE?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Costs and Procurement:

10 Sealed bid?

State bid?

Or Other?

Historical costs of previous phases

Please attach how your numbers were derived (i.e. quote, catalog, etc.)

Please attach a copy of the procurement specifications, if readily available

11 Can the project be done with a PUBLIC/PRIVATE partnership?

12 Are there GRANT opportunities? Describe

13 Can you SHARE with other departments (including BoE)?

14 Can you SHARE with other governments?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Supplemental Information:

- 15 What are the ALTERNATIVES to this project? Or describe why none.
- 16 Are there ADDITIONAL DETAILS that should be known? Describe

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Town of East Lyme

Capital Expenditure Project Funding Request form 2026-27

Project Name

Vertical Scissor Lift Purchase

Dept.

Priority

BOE

8

of

8

Please Describe the Project (What is it, where will it be, who will use it, etc.):

The district's tallest scissor lift does not allow safe access to the tallest reaches of the school ceilings in the higher gymnasiums and cafeteria. During recent lift certification training, the instructor advised staff that we were not in compliance with safety regulations when operating beyond our existing lifts' design capabilities. Renting a lift of

How will this capital project effect the efficiency and effectiveness of the town government?

Eliminates safety concerns and potential OSHA violations. Purchase solution is more cost effective over expected life than the as needed rental option. Ownership also ensures onsite capability is available when needed. Appropriate sized rental units are not always readily available.

Project or Expenditure Cost:

Estimate Useful Life

15

Purchase price/construction costs

\$

35,000

Less: Proceeds of Disposal of Asset

\$

-

Additional Costs (paid during YE 2027):

Other Costs

Total Cost for YE 2027

\$

35,000

Project Operation and Maintenance costs (Any future costs associated with this request)

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8

Describe the future costs and how they compare to the costs without this project:

O&M costs will decrease by elimination of ongoing repairs.

Please Answer Yes, No or Not Applicable. If you are including an attachment, check "more".

Define the Need:

- 1 Do we need to do this for HEALTH and SAFETY reasons?
- 2 Is this required under LAWS or REGULATIONS?
- 3 Is this ABSOLUTELY CRITICAL to the functioning of the department?
- 4 Can this project WAIT FOR ANOTHER YEAR if we had to?
- 5 Was this included in your 10-YEAR PLAN as is? Provide details if No
- 6 Has all or part of this been requested IN THE PAST? Provide details if Yes

Y	N	NA	More
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Costs and Procurement:

10 Sealed bid?

State bid?

25000

Or Other?

Please attach how your numbers were derived (i.e. quote, catalog, etc.)

Please attach a copy of the procurement specifications, if readily available

11 Can the project be done with a PUBLIC/PRIVATE partnership?

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Supplemental Information:

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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>