

FACILITIES MASTER PLAN / CAPITAL PROJECT REQUEST
CAPITAL REQUIREMENTS SUMMARY AND NEEDS ASSESSMENT FORM
(Form 1A)

Institution: Bishop State Community College

Telephone Number: 251-405-7040

Name of Respondent: Brenda K. Taylor, CMA

E-Mail Address: btaylor@bishop.edu

A. IMMEDIATE CAPITAL REQUIREMENTS - YEAR 1 (FY 2012-2013)

	Institutional Priority	Funding Sources			Estimated Total Cost	Specify Source(s) Other State	Specify Source(s) Other Funds	Building Number (If existing Facility or Facilities)	Space Utilization Description (If more than 1 Code used include % for each Code Click here to view Codes)	Projected Gross Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Projected Net Assignable Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Space Category (If more than 1 Code used include % for each Code. Click here to view Codes)	Change in Purpose (Yes or No Depending on Project)	Projected Start/ Acquisition Date (Date reported cannot be before the start of the fiscal year to be reported on the form. Fiscal Years run from Oct. 1 - Sept. 30)	Projected Completion Date	Basis of Requirement (Use no more than 2 Codes. Click here to view Codes) USE LETTER OF CODE ONLY
		Education Trust Fund	Other State Funding	Other Funds												
1. New Construction/Acquisition Projects																
1.																
2.																
3.																
4.																
Subtotal																
2. Renovation/Remodeling Projects																
1.																
2.																
3.																
4.																
Subtotal																
3. Major Capital Equipment Projects																
1.																
2.																
3.																
4.																
Subtotal																
4. Deferred Maintenance/Facilities Renewal (See Instructions)																
1. Student Life Door Upgrade/Repair	5		\$200,000	\$200,000				Plant - Facility Renewal	7	8		Other	No	10/1/2012	9/30/2013	J
2. SW Window Upgrade/Repair	3		\$100,000	\$100,000				Plant - Facility Renewal	300,400	10		E&G	No	10/1/2012	9/30/2013	E
3. Student Life HVAC upgrade/repair	1		\$150,000	\$150,000				Plant - Facility Renewal	7	8		Other	No	10/1/2012	9/30/2013	G
4. Caldwell Bldg HVAC upgrade/repair	1			\$300,000	\$300,000	Title III Funds			4	1		E&G	No	10/1/2012	9/30/2013	G
5. Administration Bldg Painting	6		\$150,000	\$150,000				Plant - Facility Renewal	1	1		E&G	No	10/1/2012	9/30/2013	E
6. Student Life Painting	6		\$150,000	\$150,000				Plant - Facility Renewal	7	8		Other	No	10/1/2012	9/30/2013	E
7. Gym Door Upgrade/Repair	3		\$100,000	\$100,000				Plant - Facility Renewal	3	5		E&G	No	10/1/2012	9/30/2013	J
Subtotal			\$850,000	\$300,000	\$1,150,000											
Total Immediate Year 1 Capital Requirements			\$850,000	\$300,000	\$1,150,000											

A brief description and justification must be attached for each project listed above.

Provide a succinct but thorough justification of the need for the capital project. This information may be included in a separate Word Processing document. See instructions for further information.

FACILITIES MASTER PLAN / CAPITAL PROJECT REQUEST
CAPITAL REQUIREMENTS SUMMARY AND NEEDS ASSESSMENT FORM
(Form 1B)

Institution: _____

Telephone Number: _____

Name of Respondent: _____

E-Mail Address: _____

B. INTERMEDIATE CAPITAL REQUIREMENTS - YEAR 2 (FY 2013-2014)

Institutional Priority	Funding Sources			Estimated Total Cost	Specify Source(s) Other State	Specify Source(s) Other Funds	Building Number (If existing Facility or Facilities)	Space Utilization Description (If more than 1 Code used include % for each Code. Click here to view Codes)	Projected Gross Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Projected Net Assignable Square Feet. (Should be used only for Subsection 1 or 2 Projects)	Space Category (If more than 1 Code used include % for each Code. Click here to view Codes)	Change in Purpose (Yes or No Depending on Project)	Projected Start/ Acquisition Date (Date reported cannot be before the start of the fiscal year to be reported on the form. Fiscal Years run from Oct. 1 -Sept. 30)	Projected Completion Date	Basis of Requirement (Use no more than 2 Codes. Click here to view Codes) USE LETTER OF CODE ONLY	
	Education Trust Fund	Other State Funding	Other Funds													
1. New Construction/Acquisition Projects																
1.																
2.																
3.																
4.																
Subtotal																
2. Renovation/Remodeling Projects																
1.																
2.																
3.																
4.																
Subtotal																
3. Major Capital Equipment Projects																
1.																
2.																
3.																
4.																
Subtotal																
4. Deferred Maintenance/Facilities Renewal (See Instructions)																
1.																
2.																
3.																
4.																
Subtotal																
Total Intermediate Year 2 Capital Requirements																

A brief description and justification must be attached for each project listed above.

Provide a succinct but thorough justification of the need for the capital project. This information may be included in a separate Word Processing document. See instructions for further information.

FACILITIES MASTER PLAN / CAPITAL PROJECT REQUEST
 CAPITAL REQUIREMENTS SUMMARY
 (Form 1C)

Institution: Bishop State Community College

Name of Respondent: Brenda K. Taylor, CMA

Telephone Number: 251-405-7040 E-Mail Address: btaylor@bishop.edu

C. LONG TERM CAPITAL REQUIREMENTS - YEARS 3-5
 (FY 2014-2015 through FY 2016-2017)

	Estimated Total Cost
1. New Construction/Acquisition Projects	
1. Build Advance Manufacturing Training Center	<u>\$8,000,000</u>
2. Build Automotive Technology Center	<u>\$6,000,000</u>
3. Build Math and Science Building	<u>\$4,000,000</u>
4.	<u> </u>
Subtotal	<u>\$18,000,000</u>
2. Renovation/Remodeling Projects	
1.	<u> </u>
2.	<u> </u>
3.	<u> </u>
4.	<u> </u>
Subtotal	<u> </u>
3. Major Capital Equipment Projects	
1.	<u> </u>
2.	<u> </u>
3.	<u> </u>
4.	<u> </u>
Subtotal	<u> </u>
4. Deferred Maintenance/Facilities Renewal (See Instructions)	
1.	<u> </u>
2.	<u> </u>
3.	<u> </u>
4.	<u> </u>
Subtotal	<u> </u>
Total Long Term Capital Requirements	<u>\$18,000,000</u>
Funding Source for All Long Term Projects:	
Education Trust Fund	\$ <u> </u>
Other State Funding	\$ <u>\$14,000,000</u>
Other Funds	\$ <u>\$4,000,000</u>

D. TOTAL ALL CAPITAL PROJECTS **\$ \$19,150,000**
 (The total of Form1A, 1B and 1C
 should be reported in Part D)

FY 2010-2011 Form

Bishop State Community College

Mobile, AL

Brief Description and Justification

- 4.1** Usage and age requires the exterior doors throughout the Student Life Center on Main campus to be upgraded and repaired.
- 4.2** Usage and age requires the exterior windows in the shops on the SW campus to be upgraded and repaired.
- 4.3& 4.4** Age and energy efficiency objectives require the HVAC systems in the Student Life Center and Caldwell Buildings on Main campus to be upgraded and repaired.
- 4.5 & 4.6** Usage and age requires the Administration Building and Student Life Center on Main campus be painted.
- 4.7** Usage and age requires the exterior storefronts in the Gymnasium on Main campus to be upgraded and repaired.