

**LEGISLATIVE COUNCIL SERVICE  
52ND LEGISLATURE-SECOND SESSION-2016  
CAPITAL OUTLAY REQUEST FORM (revised 8/25/15)**

This form is designed to assist you in describing your proposed capital outlay project. Please provide complete and accurate information. You may be asked to provide copies of the request form with supporting documentation to sponsors, other legislators and committees.

*EACH CAPITAL OUTLAY REQUEST MUST BE SIGNED BY THE SPONSORING LEGISLATOR.*

**A separate, signed form is required for each legislative sponsor.**

Forms must be submitted to the Legislative Council Service capital outlay office by:

***5 p.m., Sunday, January 31, 2016.***

DOCUMENTATION REQUIREMENTS

**Capital assets must be owned by the state or a political subdivision of the state.** If the asset will be leased to another organization, the owner will be asked to certify that the item is leased at fair market value and that the asset will be properly maintained *prior to the release of funding.* **Economic development projects** that represent a public-private partnership under the Local Economic Development Act (LEDA) require local or regional government approval and a project participation agreement in accordance with ordinances adopted pursuant to that act.

*REMEMBER TO GIVE A COPY OF THE SIGNED, COMPLETED REQUEST TO EACH SPONSOR AND  
**RETAIN A COPY FOR YOUR FILES.***

*This form may be copied or downloaded from the legislature's web site ([www.nmlegis.gov](http://www.nmlegis.gov)).  
The form is available in PDF format or as an editable MS-Word document.*

**PLEASE REMOVE THIS PAGE BEFORE SUBMITTING YOUR REQUEST.**

**LEGISLATIVE COUNCIL SERVICE  
52ND LEGISLATURE-SECOND SESSION-2016  
CAPITAL OUTLAY REQUEST FORM**

Legislative Sponsor: \_\_\_\_\_

Sponsor's Signature: \_\_\_\_\_

Legislative Aide: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Project Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Other Legislative Sponsors?: \_\_\_\_\_

*(Be sure to submit a separate signed Capital Outlay Request Form for each legislative sponsor.)*

**PROJECT DESCRIPTION**

1. What is the **TOTAL cost** for the project or this phase of the project?: \$ \_\_\_\_\_  
*(Individual legislators may fund part or all of this cost during the funding phase following the request deadline.)*

2. Brief **project description** (please specify the proposed use of capital funds, such as "to plan, design and construct a multipurpose center"; "to design and construct a dam"; or "to purchase and equip a vehicle"):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. **Location** of this project (city, town, school district, chapter, pueblo): \_\_\_\_\_

4. **County** in which the project will be located?: \_\_\_\_\_

5. **Entity requesting funding** for this project?: \_\_\_\_\_

6. **Fiscal agent (entity to receive funding)** for this project? *(Only the state or political subdivisions of the state are eligible to receive funding.)*: \_\_\_\_\_

7. **Entity that will own the project** upon completion?: \_\_\_\_\_

|   |     |     |     |
|---|-----|-----|-----|
| 8. <b>Is</b> the project:   | YES | NO  | N/A |
| a public school project that is included in a school district <b>capital master plan</b> ?:                       | ___ | ___ | ___ |
| a local government project that is included in the local <b>Infrastructure Capital Improvement Plan (ICIP)</b> ?: | ___ | ___ | ___ |

9. **If** the project is included in the ICIP, please provide the **ICIP identification #**: \_\_\_\_\_

Continued ⇨

**PROJECT BUDGET**

Please provide a breakdown of the total estimated project cost, including completed phases of the project:

|  | <u>COMPLETED</u> | <u>UNCOMPLETED</u> | <u>TOTAL</u>    |
|--|------------------|--------------------|-----------------|
| <i>Planning:</i>                           | \$ _____         | \$ _____           | \$ _____        |
| <i>Design (Architectural/Engineering):</i> | \$ _____         | \$ _____           | \$ _____        |
| <i>Construction:</i>                       | \$ _____         | \$ _____           | \$ _____        |
| <i>Land Purchase:</i>                      | \$ _____         | \$ _____           | \$ _____        |
| <i>Equipment:</i>                          | \$ _____         | \$ _____           | \$ _____        |
| <i>Rights of Way/Easements:</i>            | \$ _____         | \$ _____           | \$ _____        |
| <i>Other (specify _____):</i>              | \$ _____         | \$ _____           | \$ _____        |
| <i>Other (specify _____):</i>              | \$ _____         | \$ _____           | \$ _____        |
| <i>Other (specify _____):</i>              | \$ _____         | \$ _____           | \$ _____        |
| <b>Total Estimated Cost:</b>               | <b>\$ _____</b>  | <b>\$ _____</b>    | <b>\$ _____</b> |

Please list **PRIOR FUNDING SOURCES** for the project:

|       | YEAR  | AMOUNT   |
|-------|-------|----------|
| _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ |

Please list any **MATCHING FUNDS** secured for the project:

|       | AMOUNT   |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |

**OTHER INFORMATION**

***Will the project:***

|  | YES | NO  | N/A |
|--|-----|-----|-----|
| eliminate health or safety hazards or other liability issues?      | ___ | ___ | ___ |
| address federal, state or local judicial mandates or requirements? | ___ | ___ | ___ |
| prevent or correct deterioration of capital asset(s)?              | ___ | ___ | ___ |
| address issues of population or client growth?                     | ___ | ___ | ___ |
| be constructed on state-owned property?                            | ___ | ___ | ___ |

***Has the project:***

|  | YES | NO  | N/A |
|--|-----|-----|-----|
| been designed to be energy efficient?              | ___ | ___ | ___ |
| received public input and endorsement?             | ___ | ___ | ___ |
| planned for future operational costs?              | ___ | ___ | ___ |
| acquired land for the project? (land owner: _____) | ___ | ___ | ___ |

***Can the project:***

|   | YES | NO  | N/A |
|---|-----|-----|-----|
| be successfully phased, so that each phase will be operational? | ___ | ___ | ___ |
| be completed with this legislative appropriation?               | ___ | ___ | ___ |

***If the project is located in a major metropolitan area (Albuquerque [including Los Lunas], Santa Fe, or Las Cruces) and will serve a state agency or facility, is the project in compliance with the state master plan for that area?***

|  | YES | NO  | N/A |
|--|-----|-----|-----|
|  | ___ | ___ | ___ |

***Proposed project start date:*** \_\_\_\_\_

***If the capital asset will be leased to another organization,*** please submit a letter from the fiscal agent identifying the owner of the asset (capital assets must be owned by the state or a political subdivision of the state) and certifying that the asset will be leased at fair market value and appropriately maintained.

***If the project is a local economic development project*** representing a public-private partnership under the Local Economic Development Act, please submit a copy of the project participation agreement between the private entity and the applicable local or regional government.