

Augusta Georgia
SPLOT Phase 8
Project Request Form

Project Name **Offices for HCD**

PROJECT SUMMARY SHEET

A. Submitting Department, Agency, or Association:

Central Services Department

B. Project Name / Brief Description:

HCD was relocated to Fenwick Street October 2019 after paying \$10k in monthly rent for more than 10 years. Their current location was the former home to the Department of Family and Children’s Services for more than 30 years. Once DFCS vacated the space in June 2017 after a fire, the facility was left vacant for more than two years. HCD now occupies more than 20,000 square feet of space, of which an estimated 6,000 is deemed unusable due to the facility layout. Since they occupied existing space, the needs are not conducive to their desired operational footprint.

Check box if project represents a continuation from a previous SPLOST:

C. Project Location / Address:

510 Fenwick Street

Check box if Site Selection required:

(If site selection is required, fill out section VI. Site Criteria & Standards)

Current Property Owner (if applicable):

Augusta

D. District:

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E. Proposed Project Budget (round to nearest thousands):

Total SPLOST 8 Request: ¹	\$1,572,000
Annual Operating Cost: ²	\$ 105,000.00

¹ Figure from section III. Project Costs, first column (Total) for **SPLOST 8** Project Total

² Figure from section V. Operating Costs, first column (Annual Costs) for Total Operating Costs for Project.

F. Contact Person:

Takiyah A. Douse

Work Phone:

706-828-7174

Home Phone:

Fax Number:

706-796-5077

E-mail Address:

TDouse@augustaga.gov

G. Project Classification

Public Safety

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I. PROJECT JUSTIFICATION:

A. Project Mission Statement / Goals & Objectives:

HCD frequently serves the community both inside and outside the facility. Their ability to offer a computer lab, community meeting space and educational seminars within their facility footprint will prove valuable in their overall Department success.

B. How will this project help meet the Public Safety, Basic Facilities / Infrastructure, and/or Quality of Life needs in Augusta Richmond County?

C. Why should this project be considered for SPLOST VIII type funding?

D. To meet the Project Goals & Objectives, when should this project be completed?

E. Is this project recommended / included in any existing Augusta Richmond County Land Use Plan or Masterplan? If yes, please explain and provide necessary information.

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II. PROJECT DESCRIPTION:

A. Project Construction Program / Description:

(Provide within this space a Construction Program / Description for the project. Agencies and departments submitting requests should be prepared to submit detailed construction information, etc., as required during the technical review process.)

B. Projected Useful Life of Project:

Estimated useful life is 20 years

C. Site Specific Information: (address, tax map parcel #, etc.)

510 Fenwick Street

Check box if site currently owned by Augusta Richmond County:

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III. PROJECT COSTS:

A. Detailed project capital budget costs (to be funded from **SPLIT 8** only): *(\$80 per sq ft/15000 sq ft)*

Project Costs (round to thousand)	Total	YR1 (22)	YR2 (23)	YR3 (24)	YR4 (25)	YR5 (27)	YR6 (21)
1. Land Acquisition / ROW / Easement:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Design Fees:	\$ 84,000.00	\$ 84,000.00		\$ -	\$ -	\$ -	\$ -
3. Miscellaneous Fees:	\$ 12,000.00	\$ -	\$ 12,000.00	\$ -	\$ -	\$ -	\$ -
4. Fixtures, Furniture, and Equipment	\$ 120,000.00	\$ -	\$ 120,000.00		\$ -	\$ -	\$ -
5. Construction:	\$ 1,200,000.00	\$ -	\$ 1,200,000.00		\$ -	\$ -	\$ -
6. Testing:	\$ 36,000.00	\$ -	\$ 36,000.00		\$ -	\$ -	\$ -
8. Construction Contingency	\$ 60,000.00	\$ -	\$ 60,000.00		\$ -	\$ -	\$ -
9. Project Management:	\$ 60,000.00	\$ -	\$ 60,000.00		\$ -	\$ -	\$ -
10. Other (describe):		\$ -	\$ -		\$ -	\$ -	\$ -
11. Other (describe):	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -
SPLIT 8 Project Total:	\$ 1,572,000.00	\$ 84,000.00	\$ 1,488,000.00		\$ -	\$ -	\$ -

IV. PROJECT FINANCING:

A. Detailed project capital budget costs (to be funded from **SPLIT 8** only):

Project Sources (round to thousand)	Total	YR1 (22)	YR2 (23)	YR3 (24)	YR4 (25)	YR5 (27)	YR6 (21)
1. SPLIT 8 *	\$0	-	\$0	\$0	-	-	-
2. ARC General Fund:	\$0	-	-	-	-	-	-
3. State Grant:	\$0	-	-	-	-	-	-
4. Federal Grant:	\$0	-	-	-	-	-	-
5. Previous SPLIT:	\$0	-	-	-	-	-	-
6. Testing:	\$0	-	-	-	-	-	-
7. Reimbursement Amount	\$0	-	-	-	-	-	-
7. Other (describe):	\$0	-	-	-	-	-	-
8. Other (describe):	\$0	-	-	-	-	-	-
Total Sources:	\$0	\$0	\$0	\$0	\$0	\$0	\$0

* Amount from section III.A., "Detailed project capital budget costs" (**SPLIT 8** Project Total).

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B. Describe the current commitments for the other sources funding this project:

None

V. OPERATING COSTS:

A. Total Annual Operating Costs when Project is complete:

Operating Cost (round to thousand)	Annual Costs
(Estimated) Operating Revenues	\$ -
1. Personnel Costs:	
2. Utilities: (\$2.00 per sq ft)	30,000
■ Gas:	
■ Electrical:	
■ Water:	
■ Sewer:	-
■ Phone:	-
■ Computers:	-
3. Operating Supplies: (\$1.00 per sq ft)	15,000
4. Equipment Maintenance: (\$2.00 per sq ft)	30,000
5. Facility Maintenance: (\$2.00 per sq ft)	30,000
6. Non-Capital:	-
7. Other (describe):	-
8. Other (describe):	-
TOTAL OPERATING COSTS OF PROJECT:	\$ 105,000
NET INCOME (ESTIMATED):	\$ (105,000)

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B. Additional Personnel Information:

1. Identify the number of additional staff positions needed when project is completed:

■ Full-Time: _____

■ Part-Time: _____

2. Briefly describe the responsibilities of each additional staff position:

3. Identify the projected salary and fringe benefit cost for each additional staff position:

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VI. Site Criteria and Standards (only applicable if site Selection is required):

A. General Criteria:

1. Acreage:

- **Size:** Minimum acreage necessary for project, inclusive of parking and other
- **Topography:** Describe type of topography necessary to meet Goals and Objectives.
- **Estimated cost per acre:** Provide an estimated cost per acre and an explanation of how

2. Location / Accessibility:

- **Relative to its service area:** Define location relative to the project's service area that
- **Vehicular:** If necessary to meet the Goals and Objectives, describe what types of
- **Pedestrians:** Same as vehicular, but for pedestrians.
- **Bicycle Access:** Same as vehicular, but for bicycles.

B. No further information on site criteria and standards is necessary for the project request form at this time. However, additional

- **Development / Adjacent Impacts** (visibility, compatibility with land use plan, buffering,
- **Economy / Financing** (on- and off-site development costs, joint development
- **Environmental** (historic standards, traffic impacts, aesthetic standards, air quality, noise
- **Community Values** (displacements required, security needs, etc.)

VII. OTHER IMPACTS:

A. Positive / Negative Impacts on ARC Departments, Agencies, or other Organizations:

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B. Positive / Negative Impacts on existing Infrastructure / Systems:

C. Positive / Negative Impacts on Augusta Richmond County Tax Base:

VIII. OTHER INFORMATION:

A. Provide other information that would assist in the review of this proposed project: