

# LUMPKIN COUNTY 2020 SPLOST

## PROJECT REQUEST FORM

A. SUBMITTING DEPARTMENT, AUTHORITY, AGENCY, OR ASSOCIATION

B. PROJECT NAME/BRIEF DESCRIPTION

\_\_\_\_ CHECK IF THIS IS A CONTINUATION FROM A PREVIOUS SPLOST

C. PROJECT LOCATION

\_\_\_\_ CHECK IF LAND ACQUISITION IS REQUIRED

D. PROPOSED PROJECT BUDGET (ROUND TO THE NEAREST THOUSANDS)

TOTAL BUDGET	
ANNUAL OPERATING COST (SEE ATTACHMENT A)	

E. CONTACT PERSON:

WORK PHONE:

EMAIL:

F. TO MEET THE PROJECT GOALS AND OBJECTIVES & WHEN SHOULD THIS PROJECT BE COMPLETED?

**ATTACHMENT A  
ANNUAL OPERATING COST  
WORKSHEET**

<b>ADDITIONAL PERSONNEL COSTS:</b>	
<b>NUMBER OF POSITIONS</b>	
<b>UTILITIES:</b>	
<b>GAS</b>	
<b>ELECTRICAL</b>	
<b>WATER</b>	
<b>SEWER</b>	
<b>PHONE</b>	
<b>TRASH PICK UP</b>	
<b>OTHER</b>	
<b>OPERATING SUPPLIES</b>	
<b>EQUIPMENT MAINTENANCE</b>	
<b>FACILITY MAINTENANCE</b>	
<b>SOFTWARE MAINTENANCE</b>	
<b>OTHER (DESCRIBE)</b>	
<b>OTHER (DESCRIBE)</b>	
<b>OTHER (DESCRIBE)</b>	
<b>TOTAL COSTS</b>	