



## Town of Andover, Connecticut Capital Improvement Planning Committee Request for Appropriation

**FISCAL YEAR:**

**DATE SUBMITTED:**

**DEPARTMENT:**

**FACILITY:**

**EQUIPMENT:**

**ATTACHMENTS:** Attach pertinent information such as quotes, maintenance records, correspondence, reports, regulations/statutes, funding source etc.

**PROJECT NAME:**

Capital Improvement Planning Committee Use Only		
Reference No. _____		
Approved <input type="checkbox"/>	Rejected <input type="checkbox"/>	Date _____
Comments Attached <input type="checkbox"/>		

<input type="checkbox"/> Repair	<input type="checkbox"/> Replacement	New
<input type="checkbox"/> Repair	<input type="checkbox"/> Replacement	New

<b>Detailed Request (attach additional information as needed)</b>
<b>TOTAL APPROPRIATION REQUESTED<sup>1</sup>:</b>

X	Source of Funding	Amount (\$)
	Town of Andover Existing Fund (Specify)	
	Town of Andover Annual Budget (Taxation)	
	Town of Andover Annual Budget (Grant)	
	Other (Specify)	

Submitted by: _____	Signature: _____	Contact No.: _____
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Notes

The appropriation request must include the entire amount required to complete the purchase/project, including grants.