

## Capital Budget Fiscal Note Total Project Cost

**RELATING TO:** 

Change Order Request, Contract S06038C31, Chlorine Contact Basin Drain Valve Replacements at the South Shore Water Reclamation Facility, and Restore the Executive Director's Original Delegated Authority

Capital Project Number(s) Impact of Requested Action on Total Project Cost:				
506038	Increase	Decrease	New Proj	ect X No Change
Total Project Cost Analysis		Project C	<u>osts</u>	
Adopted 2025 Total Project Cost		\$14,993,	555_	
Previously Approved Changes				
Approved Total Project Cost		\$14,993,	555_	
Requested Total Project Cost				
Requested (Increase)/Decrease			\$0	
Action to be taken to Long-Ran			=	
		nce for Cost and Sched	_	
Transfer from another project (specify in comments)				
	Delay Project(s) (specify in comments)			
	Delete Project(s) (spe	ecify in comments)		
	Other			
	Transfer to Allowance	for Cost and Schedule	e Changes	
	Transfer to Allowance	for Cost and Schedule	e Changes	
Comments	Transfer to Allowance	for Cost and Schedule	e Changes	
		for Cost and Schedule	e Changes	
		for Cost and Schedule	e Changes	
		for Cost and Schedule	e Changes	
		for Cost and Schedule	e Changes	
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		for Cost and Schedule	e Changes	
		for Cost and Schedule	e Changes	
		for Cost and Schedule	e Changes	
		e for Cost and Schedule	e Changes	
Comments There are sufficient funds for this		e for Cost and Schedule	e Changes	
		e for Cost and Schedule	e Changes	Date: