COUNTY OF SUSSEX CAPITAL REQUEST FORM LAND, BUILDINGS AND IMPROVEMENTS

1.	Department		2. Division			3.	Priority	4. Date			
	Shared Services		Information	Technology		1.			10/27/2014		
5.	Project Title			6. Project Number		7.	Project Location and A	ddress			
	Storage Area Network				9		Admin Building				
8.	Purpose, Description and Scope o	f Project				9.	Request History				
	Data storage is approaching year	6 and maint	enance fees are	now increasing.			Has this Project been	requested prev	iously?		
	Current storage is at 85% usage le						☐ Yes ☑ No				
	Plan to expand size 10TB on anot			•			If yes, indicate year(s)	of prior reques	t:		
	This new system can be expanded	l in 3 stages	to move off of the	ne old system.							
	1 00 0										
10.	Justification (check all that apply)										
	✓ Efficiency ☐ Effective	eness	Mandate	☐ Safety	☐ New Pro	ogra	m 🔽 Cost Sa	avings			
	☐ Other	Specify		11. Permits and 1	esting						
			Are permits a	nd/or environr	nent	al testing required?	Yes	✓ No			
	Briefly explain risk if Project is defe	erred:		If yes, list the	If yes, list the external agencies involved in the approval process:						
	OE Support \$32k annually then wil	I increase fro	om now on								
	Investing in a 3 year soon to be en	d of life tech	nology.								
12.	Project Cost										
	Estimated Project Cost:	\$	200,500	Estimated Useful	Life of Project	:	10 years				
	Of the total cost, how much is			Source of Estimat	P: (Attach supportin	na doc	numentation)				
	for actual construction and/or			☐ In-House:	C. (Autom oupportin	ig doc	amonator)				
	acquisition costs?	\$	_		-		Personnel Name & Titl	е			
		<u> </u>	_	☐ Consultant:							
	Sources of Funding:						Vendor Name				
	☐ Budget Appropriations:	\$	-	Budget Account:			\$ -				
			_	(List applicable accounts)	Acco	unt Nu	ımber	Amount			
	Capital Improvement Fund:	\$	200,500				\$ -				
	_				Acco	unt Nı	ımber	Amount			
	☐ Capital Surplus:	\$					<u> </u>				
		_			Acco	unt Ni	ımber	Amount			
	Grant-In-Aid/Other:	\$		Grant/Other ID:			Grantor & Grant Title				
	Daht to be Authorized	Φ					Grantor & Grant Fille				
	☐ Debt to be Authorized:	\$									
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COUNTY OF SUSSEX CAPITAL REQUEST FORM LAND, BUILDINGS AND IMPROVEMENTS

ne project being requested part of a multi-phas			It was has	w many phaces th	rough completion?					
	be project:] Yes ☑ No	ii yes, nov	w many phases m	rough completion?					
Briefly describe the phases of the project and the relationship of the project being requested:										
any of the multi-phase project been funded in	n prior years?] Yes □ No								
any or the main-phase project been funded in	i prior years!	Tes NO								
es, list below the Ordinance, account number,	amount, and applica	able phase:								
,		•								
. #:										
	t Number	Amo	unt		Phase					
. #:	t Number	\$ Amo	- unt		Phase					
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Department	2. Division		3.	Priority	4. Date	
Shared Services	Information Te		1.			
Project Title	6.	Project Number	7.	Project Location and Address		
Network Firewalls and VPN Access			9	Admin Building		
Purpose, Description and Scope of Pro	ject		9.	Request History		
The existing firewall are at end of life in	June of 2015			Has this Project been requeste	ed previously?	
Replace old system with new 3 gen fire	wall technology			Yes No		
Multi Cloud environment requires layer			_	If yes, indicate year(s) of prior	request:	
On-premise clouds and end point device				ii yoo, iilaloato you.(o) oi piloi	.oquosi.	
On-premise clodes and end point device						
Justification (check all that apply)						
Efficiency Effectivenes	s Mandate	Safety	New Program	Cost Savings		
Other		44 Damaita and Tan	A:			
Other	Specify	11. Permits and Tes				
	· ·		or environmental testing required		Yes	No
Briefly explain risk if Project is deferred		If yes, list the ex	ternal agencies involved in the ap	proval process:		
No support when device fails in June of	f 2015					
Systems will be Venerable to Attacks						
Project Cost						
Estimated Project Cost:	\$ 40,000	Estimated Useful Life of Pro	piect:	10 years		
Estimated Froject Oost.	Ψ 40,000	Estimated Oscidi Elic of Fre	Joot.	ycars		
Of the total east, how much is		Course of Fatimates				
Of the total cost, how much is		Source of Estimate: (Attach su	pporting documentation)			
for actual construction and/or		In-House:				
acquisition costs?	\$ -			Personnel Name & Title		
		Consultant:				
Sources of Funding:			'-	Vendor Name		
Budget Appropriations:	\$ -	Budget Account:		\$ -		
Baaget / ippropriations.		(List applicable accounts)	Account Numb		Amount	
Canital Improvement Funds	£ 40,000	(=====================================				
Capital Improvement Fund:	\$ 40,000		Account Numb	<u> </u>	Amount	
			Account Numb		Amount	
Capital Surplus:	\$ -					
			Account Numb	per	Amount	
Grant-In-Aid/Other:	\$ -	Grant/Other ID:				
				Grantor & Grant Title		
Debt to be Authorized:	\$ -					
Dobt to be / tatheness.						
Multi Dhaga Praiseta						
Multi-Phase Projects						
Is the project being requested part of a	multi-phase project?	Yes	No If yes, how many phases the	rough completion?		
Briefly describe the phases of the proje	ect and the relationship of the project being re	equested:				
			·			
		Yes	No			
Has any of the multi-phase project been	n funded in prior years?					
Has any of the multi-phase project beer	n funded in prior years?					
	n funded in prior years? nt number, amount, and applicable phase:					
If yes, list below the Ordinance, accour						
	nt number, amount, and applicable phase:	\$	Amount	Dhoo		
If yes, list below the Ordinance, accound ord. #:		\$	- Amount	Phase	3	
If yes, list below the Ordinance, accour	nt number, amount, and applicable phase: Account Number		-			
If yes, list below the Ordinance, accour	nt number, amount, and applicable phase:	\$	Amount - Amount - Amount	Phase Phase		
If yes, list below the Ordinance, accour Ord. #: Ord. #:	nt number, amount, and applicable phase: Account Number	<u>\$</u>	-			
If yes, list below the Ordinance, accour	nt number, amount, and applicable phase: Account Number	\$	-		3	
If yes, list below the Ordinance, accour Ord. #: Ord. #: Ord. #:	nt number, amount, and applicable phase: Account Number Account Number	\$ \$ \$	- Amount -	Phase	3	
If yes, list below the Ordinance, accour Ord. #: Ord. #:	Account Number Account Number Account Number	<u>\$</u>	Amount - Amount - Amount -	Phase	9	
If yes, list below the Ordinance, accour Ord. #: Ord. #: Ord. #: Ord. #:	nt number, amount, and applicable phase: Account Number Account Number	\$ \$ \$ \$	- Amount -	Phase	9	
If yes, list below the Ordinance, accour Ord. #: Ord. #: Ord. #:	Account Number Account Number Account Number Account Number	\$ \$ \$	Amount - Amo	Phase Phase		
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	Account Number	Amount	Phase
Ord. #:		\$ -	
	Account Number	Amount	Phase

Shared Services	Department 2. Division Shared Services Information Tech		hnology		1	B. Priority 4. Date			
Project Title Dual Factor Authentication		6.	Project Number		7. Pro	ject Location and Address			
Purpose, Description and Scop Secure access to management		nt & Security System	ns.		9. Red Has	uest History this Project been requested Yes No es, indicate year(s) of prior re			
Justification (check all that apply)									
•	ctiveness Ma	andate	Safety	New Progr	am	Cost Savings			
Other Security Briefly explain risk if Project is of Security Auditor recommended			Are permi	nd Testing is and/or environmental tes the external agencies invol		cess:	Yes	No	
management computer systems									
Project Cost									
Estimated Project Cost:	\$	23,000	Estimated Useful Life	of Project:		7 years			
Of the total cost, how much is for actual construction and/or acquisition costs?	0		Source of Estimate: (In-House:	attach supporting documentation)		Personnel Name & Title			
acquisition costs?	<u> </u>	-	Consultant:						
Sources of Funding: Budget Appropriations:	œ.		Dudget Assessets			Vendor Name			
Budget Appropriations:	\$	-	Budget Account: (List applicable accounts)		Account Number	<u> </u>	Amount		
Capital Improvement Fund:	\$	23,000			Account Number		Amount		
Capital Surplus:	\$	_			Account Number	\$ -	Amount		
Supital Surpius.					Account Number		Amount		
	Grant-In-Aid/Other: \$ -		O		Gran		antor & Grant Title		
Grant-In-Aid/Other:	\$		Grant/Other ID:			Grantor & Grant Title			
Grant-In-Aid/Other: Debt to be Authorized:	\$		Grant/Other ID:	-		Grantor & Grant Title			
Debt to be Authorized: Multi-Phase Projects	\$	<u> </u>		No. If you have no	ny phagaga through ago				
Debt to be Authorized: Multi-Phase Projects Is the project being requested p	\$ part of a multi-phase project?	-	Yes	No If yes, how ma	ny phases through con				
Debt to be Authorized: Multi-Phase Projects Is the project being requested p	\$	-	Yes	No If yes, how ma	ny phases through com				
Debt to be Authorized: Multi-Phase Projects Is the project being requested p	\$ part of a multi-phase project?	-	Yes	No If yes, how ma	ny phases through con			-	
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Debt to be Authorized: Multi-Phase Projects Is the project being requested p	\$ part of a multi-phase project? the project and the relationship of	- of the project being re	Yes	No If yes, how ma	ny phases through con				
Debt to be Authorized: Multi-Phase Projects Is the project being requested p Briefly describe the phases of the	\$ part of a multi-phase project? the project and the relationship of the project been funded in prior years?	- of the project being re	Yes quested:		ny phases through con				
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Debt to be Authorized: Multi-Phase Projects Is the project being requested p Briefly describe the phases of the phase project o	\$ part of a multi-phase project? the project and the relationship of the project been funded in prior years? account number, amount, and	of the project being re	Yes quested:	No S -	ny phases through con	ppletion? Phase			
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Debt to be Authorized: Multi-Phase Projects Is the project being requested p Briefly describe the phases of th Has any of the multi-phase proj If yes, list below the Ordinance, Ord. #: Ord. #: Ord. #: Ord. #:	\$ part of a multi-phase project? the project and the relationship of the project and the relationship of the project been funded in prior years? , account number, amount, and	of the project being re applicable phase:	Yes quested:	No S - Amount S - Amount S - Amount S - Amount	ny phases through con	ppletion? Phase			
Debt to be Authorized: Multi-Phase Projects Is the project being requested p Briefly describe the phases of the phase project p	\$ part of a multi-phase project? the project and the relationship of piect been funded in prior years? account number, amount, and	applicable phase:	Yes quested:	No	ny phases through con	Phase Phase			
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	Account Number	Amount	Phase
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