FIVE-YEAR FACILITY NEEDS PLAN, pursuant to IC 67-5708B

AGENCY INFORMATION

AGENCY NAME:	Department of Administration		
Division/Bureau:	Division of Public Works (Design and Construction only)		
Prepared By:	Diane Blume	E-mail Address:	diane.blume@adm.idaho.gov
Telephone Number:	332-1811	Fax Number:	334-2307
DFM Analyst:	Keith Reynolds	LSO/BPA Analyst:	Robyn Lockett
Date Prepared:	8/29/2011	For Fiscal Year:	2016

FACILITY INFORMATION (please list each facility separately by city and street address)

Facility Name:	Public Works Building				
City:	Boise	County:	Ada		
Street Address:	502 N. Fourth Street			Zip Code:	83702
Facility Ownership: (could be private or state-owned, use "X" to mark one):	Private Lease (use "X" to mark):		State Owned (use "X" to mark):	X	Lease Expires:

FUNCTION/USE OF FACILITY: Could be administrative use, client counseling, hearing rooms, field offices, etc. Address any specialized needs which require additional square feet.

Main administrative office of the Division of Public Works. Facilities Services is not included in these numbers since costs associated are considered core space, which is not to be reported. Same for all buidlings--no core space included.

COMMENTS: Address reasons for expanding or relocating; amount of space leased to other state agencies, federal agencies, etc. & the amount of rent they pay for the use of your facility; or other comments which might be helpful.

Should the economy improve in the future, more funds may be appropriated to state construction projects and consequently, additional FTP's may be needed and requested.

SURPLUS PROPERTY: Facilities to be disposed of and funds re-utilized for building replacement or renovation of facilities. This could also include leased facilities if the leased facility is to be vacated prior to the expiration date of the lease.

FISCAL YR:	ACTUAL 2011	ESTIMATE 2012	REQUEST 2013	REQUEST 2014	REQUEST 2015	REQUEST 2016
Use "X" to mark the year facility would be surplused.						

WORK AREAS: Work areas are areas occupied by full-time employees, contractors, seasonal employees, auditors, etc. (3 people working in one building would be 3 work areas)

FISCAL YR:	ACTUAL 2011	ESTIMATE 2012	REQUEST 2013	REQUEST 2014	REQUEST 2015	REQUEST 2016
Total Number of Work Areas:	22	22	22	22	22	22
Full-Time Equivalent Positions:	21.5	21.5	21.5	21.5	21.5	21.5
Temp. Employees, Contractors, Auditors, etc.:	1	2	2	2	2	2

SQUARE FEET: Use "net rentable" sq ft if in a facility leased from a private party; use "usable" sq ft if in a State-owned facility. Typically, this will be the figure shown in the Lease Agreement if leased from a private party or in the MOU if state-owned.

FISCAL YR:	ACTUAL 2011	ESTIMATE 2012	REQUEST 2013	REQUEST 2014	REQUEST 2015	REQUEST 2016
Square Feet:	7092	7092	7092	7092	7092	7092

FACILITY COST: Include annual rent, plus any facility-related costs, such as utilities, janitorial service, property taxes or building maintenance which are not included in rent payment made to your Landlord. If improvements will need to be made to the facility and will be paid by the agency, this should be included as well. If the lease will be expiring and the future rent is not specified in the lease agreement, increase rent by 3%/yr. Increase all other facility-related costs by 3%/yr as well. Use "Calculation Sheet" if necessary. Do not include telephone costs or rent discounts. If you anticipate moving to a new facility, you need to take into account any increase in sq ft leased and estimate a new market rate for the new facility. Do NOT use your old rate per sq ft – it may not be a realistic figure.

FISCAL YR:	ACTUAL 2011	ESTIMATE 2012	REQUEST 2013	REQUEST 2014	REQUEST 2015	REQUEST 2016
Total Facility Cost/Yr:	$48,521.00	$48,521.00	$48,521.00	$48,521.00	$48,521.00	$48,521.00

IMPORTANT NOTES:

1. Please fill in the white sections only! If you have any questions, please call Tracy @ 332-1933.
2. Upon completion, please send to Tracy Whittington at the Division of Public Works. This can be emailed to him at Tracy.Whittington@adm.idaho.gov.
3. If you have five or more locations, please summarize the information on the Facility Information Summary Sheet and include this summary sheet with your submittal.
4. Attach a hardcopy of this submittal, as well as the Facility Information Summary Sheet, if applicable, with your budget request.

AGENCY NOTES: