Connecticut Light & Power
A Northeast Utilities Company

Specific Project Proposal - Project #: CS00031

[redacted] Rehab

Work Classification

Category: Substation
Type: REL7
Type Desc: GENERAL MODERNIZATION
Work Type: Other Work

Ownership / Management

AWC: East Hampton
Statewide: No
Owner: [redacted]
Manager: [redacted]

Project Information

Status: Prelim Design Approved
SPS #:
AIS Score:
Associated Projects:
Assignment ID:
Patrol Find ID:

Budget Summary - Preferred Option

Preferred bus rehab scope

2015

ID	Title	Status	Rev #	Contingency	Expenditure Amount	Net Estimate
1	Installation of Bus isolating switches	Prelim	0	0 %	$237,218	$237,218
3	Replacement of isolation switches	Prelim	0	0 %	$315,326	$315,326
				2015 Total:	**$552,544**	**$552,544**
				Total Project:	**$552,544**	**$552,544**

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Project Option Summary

ID	Description	Segments	Preliminary Estimate	Construction Estimate	Variance	IEEE $/CMS	All (w/Storm)	Prfrd
O2	Preferred bus rehab scope	1,3	$552,544	$0	100 %	$0.00	$0.00	☑

Segments

ID	Title	Preliminary Estimate	Construction Estimate	Variance	IEEE $/CMS	All (w/Storm)
1	Installation of Bus isolating switches	$237,218			$0.00	$0.00
2	Replacement of -5 switches	$0			$0.00	$0.00
3	Replacement of isolation switches	$315,326			$0.00	$0.00

Background / Scope

Issue:

[redacted]

DME Estimate values;
Eversource Cost - $237.2k + $315,326 (scope increase)

Total $588,526.00

Outside Vendor - $382,422 + $413,500 = $795,922

Project Description:

[redacted]

[redacted]

[redacted]

[redacted]

Revision 1;

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

Other Considerations:

[redacted]

[redacted]

[redacted]

Revision / ACT Comments:

This is a revision to the previously presented package.

Additional scope was added

If we don't do this project, what will happen?

Environmental

Water Pollution: No Change Soil Contamination: No Change Natural Habitats: No Change

Alternatives considered based on Environmental Impact or Description of Aspects Oil Spill Risks Considered? ☐

Safety Concerns With This Project? ☐

Explain:

External Stakeholders

Customer Impact / Involvement

Cust. Impacted: Approx. Pole Count (NU):

Crit. Cust. Impacted: Approx. Pole Count (Other):

Adjoining Property Owner Consent Required: ☐ Town Hearing Required: ☐

Other Utility Pole Custodian Area: ☐ Easement Required: ☐

State Highway Permit Required: ☐

Relocation / New Service

New Srvc. Contact: Requestor Type:

Customer Type: State Highway Project #:

Request Number: Route #:

Segment CS00031-01

General Information

Segment: 1 - Installation of Bus isolating switches **Status:** Prelim Design Approved

Segment Type: S/S - BUS REHAB **Town:** [redacted] **Budget Year:** 2015

Work Type: Other **Trimming Required:** ☐ **In Service Date:** 12/31/2015

Description: [redacted]

Itemized Work List

ID	Major Grid	Minor Grid	Description of Work to be Performed

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Segment CS00031-01

Estimate

	Preliminary Estimate Summary
Revision Number:	0
Contingency:	0.00 %
SubTotal:	$237,218
Contingency Amount:	$0
Estimate:	$237,218
Reimbursement:	$0
Net Amount:	**$237,218**
Description:	Both Segments are prefered. Cost estimate is for entire project.

Item Description	CU	$ / Per	Qty	Amount
OTHER	14-ALL14	[redacted]	[redacted]	$237,218.00
OTHER				
This cost is for the entire project. Segment cost were not provided.				

Associated / Impacted Devices

Status	Type / SysID	Street / Cross St	Structure / Town	Circuit	Map	Cust	Notes
Install	[redacted]	[redacted]	[redacted]	[redacted]			

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Design Alternative

CS00031-02

General Information

Segment: 2 - Replacement of -5 switches
Status: Cancelled
Segment Type: S/S - BUS REHAB
Town: [redacted]Y
Budget Year: 2015
Work Type: Other
Trimming Required: ☐
In Service Date: 12/31/2015
Description: This segment is to address;

[redacted]

[redacted].

Itemized Work List

ID	Major Grid	Minor Grid	Description of Work to be Performed

Design Alternative

CS00031-02

Estimate

	Preliminary Estimate Summary
Revision Number:	0
Contingency:	0.00 %
SubTotal:	$0
Contingency Amount:	$0
Estimate:	$0
Reimbursement:	$0
Net Amount:	**$0**

Description: The cost for segment 01 is the cost for the entire project.

Item Description	CU	$ / Per	Qty	Amount

Associated / Impacted Devices

Status	Type / SysID	Street / Cross St	Structure / Town	Circuit	Map	Cust	Notes

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Segment CS00031-03

General Information

Segment: 3 - Replacement of isolation switches **Status:** Prelim Design Approved

Segment Type: S/S - BUS REHAB **Town:** [redacted] **Budget Year:** 2015

Work Type: Other **Trimming Required:** ☐ **In Service Date:** 12/31/2015

Description: [redacted]

Itemized Work List

ID	Major Grid	Minor Grid	Description of Work to be Performed

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Segment CS00031-03

Estimate

	Preliminary Estimate Summary
Revision Number:	0
Contingency:	0.00 %
SubTotal:	$315,326
Contingency Amount:	$0
Estimate:	$315,326
Reimbursement:	$0
Net Amount:	**$315,326**
Description:	

Item Description	CU	$ / Per	Qty	Amount
OTHER	14-ALL14	[redacted]	[redacted]	$315,326.00
OTHER				

Associated / Impacted Devices

Status	Type / SysID	Street / Cross St	Structure / Town	Circuit	Map	Cust	Notes