Connecticut Light & Power
A Northeast Utilities Company

Specific Project Proposal - Project #: CS00144

[redacted] - [redacted]

Work Classification

Category: [redacted]
Type: RBEF
Type Desc: EMERGENT EQUIPMENT FAILURES -
Work Type: Repair/Replace Failed Equipment

Ownership / Management

AWC: Cheshire
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

OCRC ENG Approved 07/01/2015

2016

ID	Title	Status	Rev #	Contingency	Expenditure Amount	Net Estimate
1	[redacted]	Prelim	0	0 %	$195,000	$195,000
				2016 Total:	**$195,000**	**$195,000**
				Total Project:	**$195,000**	**$195,000**

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[redacted] - [redacted]

Project Option Summary

ID	Description	Segments	Preliminary Estimate	Construction Estimate	Variance	IEEE $/CMS	All (w/Storm)	Prfrd
O1	OCRC ENG Approved 07/01/2015	[redacted]	$195,000	$0	100 %	$0.00	$0.00	☑

Segments

ID	Title	Preliminary Estimate	Construction Estimate	Variance	IEEE $/CMS	All (w/Storm)
1	[redacted]	$195,000			$0.00	$0.00

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[redacted] - [redacted]

Background / Scope

Issue:

The [redacted]

Project Description:

7/1/15 - This is for ENG approval. The project scope is to [redacted].

The estimated cost is $195k. The ISD is 5/31/16.

Other Considerations:

Revision / ACT Comments:

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 CS00144-01

General Information

Segment: 1 - Replace [redacted]
Status: Prelim Design Approved
Segment Type: S/S - EQFSUBST
Town: [redacted]
Budget Year: 2016
Work Type: Other
Trimming Required: ☐
In Service Date: 05/31/2016
Description: [redacted].

Itemized Work List

ID	Major Grid	Minor Grid	Description of Work to be Performed
1	[redacted]	[redacted]	[redacted].

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[redacted] - [redacted]

Segment CS00144-01

Estimate

Preliminary Estimate Summary

Revision Number:	0
Contingency:	0.00 %
SubTotal:	$195,000
Contingency Amount:	$0
Estimate:	$195,000
Reimbursement:	$0
Net Amount:	**$195,000**

Description: Replace [redacted]

Item Description	CU	$ / Per	Qty	Amount
OTHER	15-ALL14	[redacted]		$195,000.00
OTHER				

Associated / Impacted Devices

Status	Type / SysID		Structure / Town		Cust	Notes
Existing	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	

Reliability Projection

Title:

Outage Start Date: 01/01/2007 Outage End Date: 06/24/2015 Years History: 8.48

[redacted]