Appendix 5
Subsidiary Board Approval Package Template

Supplement Request Form

Repair Damaged Infrastructure	**Project Number: CD01563**
Date Prepared: 02/24/2023	**Company:** CL&P Electric Distribution 11 Choose an item. Choose an item.
Organization: Electric	**Class(es) of Plant: Distribution**
Project Initiator: [redacted]	**Project Category: Underground Structure**
Project Manager: [redacted]	**Project Type:** Specific
Project Sponsor: [redacted]	**Project Purpose: Repair Damaged Underground Structure**
Estimated in service date: 08/15/2020	**Capital Investment part of original Operating Plan:** No
Current Authorization Amount: $ 257,500	**O&M Expenses part of request:** No
Supplement Request: $295,400	**Other:**
Total Request: $552,832	

Supplement Justification

Supplement Request Forms must be completed for projects in accordance with the Project Authorization Policy and approval levels in the Delegation of Authority Policy (DOA) as follows:

For Corporate Shared Services Projects:
For projects $500K to $16.5M - An increase in total authorized cost > 15% or;
For projects > $16.5M - An increase in total authorized cost > $2.5M

For Distribution and Transmission Operations Projects:
For projects $500K to $16.5M- An increase in total authorized cost > 15% or;
For projects > $16.5M - An increase in total authorized cost > $2.5M

Justification for Additional Resources

[redacted] contributors to this were:

- I95 needed to shutdown lanes nightly for the work to proceed
- Eversource required by state to hire certain vendor with modified trucks for netting to catch falling debris
- Job could only be done in 20' sections nightly due to lane closures caused by this work.
- Extra state troopers needed to be hired due to the location of the work.
- Overheads significantly higher than estimated.

All of the above contributed to the "outside services and labor" being significantly higher than originally estimated, as shown in the Supplement Cost Summary below.
As well as the direct costs above, the indirects on this project far exceeded the original estimate.

Supplement Cost Summary

Dollars are in 1000's

Capital Costs	Prior Authorized	Unauthorized Actuals/Supplemental Request	Total Request
Internal Labor and Construction Equipment	23.7	10.4	34.1
Outside Services	103.8	45.4	149.2
Materials	1.4	0.6	2.0
Removals	36.5	18.8	55.3
Risk and Contingency	0.0	0.0	0.0
Other	2.0	0.9	2.9
Subtotal	**167.4**	**76.1**	**243.5**

Indirect Capital Costs	Year 1	Year 1	Total
Indirects/Overheads (including benefits)	88.5	215.0	303.6
Capitalized interest or AFUDC, if any	1.5	4.3	5.7
Subtotal	**90.0**	**219.3**	**309.3**
Total Capital Costs (Gross)	**257.5**	**295.4**	**551.7**
Less Total Customer Contribution	**0.0**	**0.0**	**0.0**
Project Costs (Net of Reimbursement)	**257.5**	**295.4**	**552.8**

Original PAF is attached below for job description and details.

PAF -CD01563

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Note: to save, complete and print the template, please right click on the above icon and select Presentation Object and Open