Operations Project Authorization Form

Project Title: OH INSURANCE CLAIM TOLLAND	**Project Number: INSOH5T19**
Date Prepared: 10/17/2023	**Company:** Eversource CT
Organization: Electric Field Operations	**Class(es) of Plant:** D Line
Project Initiator: [redacted]	**Project Category:** Insurance Claim/Keep Cost
Project Manager: [redacted]	**Project Type:** Specific
Project Sponsor: [redacted]	**Capital Investment part of original Operating Plan:** Yes
Estimated in service date: 12/31/2019	**Emergency Related Request?** No
Eng./Constr. Resources Budgeted? Yes	**Facility Type** (check all that apply): ☐ PTF ☐ non-PTF X Distribution
Total Gross Capital Request: $654K	**Authorization Type:** Full Funding

Executive Summary

This request is for the approval of $654K for overhead equipment that was damaged in an accident in the Tolland area in 2019.

The work covers replacing or repairing overhead equipment that was damaged in an accident. The work was identified through 9As that comprise of damage to existing facilities usually from accident such as hit and runs. Depending on the damage to the facility then the equipment can be removed completely, replace the obsolete unit of property, or repair the unit if possible. The equipment involved could be any overhead equipment including poles and anything attached to the pole.

Project Costs Summary

WO NUMBER	WO DESCRIPTION	PROJECT DEPT CODE	PROJECT	PROJECT DESCRIPTION	WO IN SRV DATE	WO INIT DATE	Total Amount (K)
5T822601	RSO & AWC [redacted] WINDSOR	2BB	INSOH5T	OH INSURANCE CLAIM TOLLAND ANNUAL	6/14/2019	8/11/2019	$654

WO 5T822601 consisted of contractor labor for repairing/replacing equipment on [redacted]. Specifically this work involved [redacted]. Environmental was required to pump the pad mount transformer.

Technical Justification:

Project Need, Objective and Justification

It is necessary to perform this work and make these repairs, or remove/replace the equipment to keep the system operating. Many accidents, including hit and runs, occur and cause outages or structural damage to Eversource equipment which could result in more outages or safety incidents if not repaired/replaced.

Appendix 2
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Project Scope

Repair, replace, or remove obsolete facilities that been involved in an accident. This could contain the following: pole replacements, damaged hotline clamps, damaged splices, and any other piece of equipment that was damaged during the accident. Doing this work ensure that the equipment is operating up to standards, when equipment is damaged in an accident it can lead to more safety issues, outages, and negatively affect the system.

Major Material includes:
Transformers
Elbows
Hotline clamps
Crossarms
Floating primaries
Skinned locations
Messenger guards
Arresters
Bent pins
Guys/anchors
Stirrups
Splices
Reinforcements
Poles

Background

This project will address assets that have been involved in an accident and need to be repaired, replaced, or removed for the betterment of the system.

Alternatives Considered:

Were alternative solutions considered/applicable? Include any cost/benefit analysis.

Project is a compliance obligation - no alternatives considered - no financial benefit

Regulatory Approvals:

N/A

Project Schedule

Milestone/Phase Name	Estimated Date
100% Engineering Completion	01/01/2019
Construction Start	01/01/2019
In Service Date	12/31/2019

Risks and Risk Mitigation Plans

N/A

References

N/A

Appendices (One-Line Diagrams, Images, etc.)

N/A.