

**TOWN OF WATERFORD
CAPITAL IMPROVEMENT PLAN
PROJECT CONSOLIDATION FORM FY 2026-2030**

	DEPARTMENT/ AGENCY:								
DEPT PRIORITY	PROJECT NAME	FUNDING SOURCE	FISCAL YEAR 2025-2026	FISCAL YEAR 2026-2027	FISCAL YEAR 2027-2028	FISCAL YEAR 2028-2029	FISCAL YEAR 2029-2030	TOTAL	
1	Quaker Hill FD Fire Alarm	1	15,000					15,000.00	
1	SCBA bottle repalcement	3	50,000					50,000.00	
1	Cohanzie Air Conditioning	1	15,000					15,000.00	
2	Jordan FD Bathroom reno	1		75,000				75,000.00	
2	Equipment Replacement	1		75,000				75,000.00	
3	Goshen Pitched Roof	3	60,000	65,000				125,000.00	
3	Jordan Windows	1			60,000			60,000.00	
4	Knox Box Upgrades	1				40,000		40,000.00	
4	Cohanzie Bunk room reno	1				50,000		50,000.00	
5	Jordan Bunk Room reno	1					50,000	50,000.00	
5	Quaker Hill Generator	1					55,000	55,000.00	
1	Pre-Emption Traffic Lights	1						-	
	TOTALS		140,000.00	215,000.00	60,000.00	90,000.00	105,000.00	610,000.00	

INDEX TO FUNDING SOURCES.

- 1 CURRENT YEAR CAPITAL IMPROVEMENTS
- 2 UTILITY BUDGET/SEWER CAPITAL MAINTENANCE FUND
- 3 TRANSFER TO CAPITAL & NONRECURRING.
- 4 SHORT AND LONG TERM DEBT FINANCING
- 5 LoCIP
- 6 CNR UNDESIGNATED FUND BALANCE
- 7 FEDERAL/STATE GRANTS
- 8 OTHER FUNDING

**TOWN OF WATERFORD
CAPITAL PROJECT REQUEST FORM
2025-2026 FISCAL YEAR REQUEST**

DEPARTMENT/AGENCY Fire Services	CONTACT PERSON Steve Dubicki
PROJECT NAME Quaker Hill Fire Alarm replacement	DEPARTMENT PRIORITY 1

1	DESCRIPTION AND JUSTIFICATION (describe the type, purpose & anticipated accomplishments of the project)																																																																						
	FireAlarm system is old and out dated, causing repair and replacement problems. It is no longer able to clear alarms and has constant alarms in alarm mode due to parts and equipment unable to be repalced. Sections of the system are not covering the building properly.System needs to get replaced and upgraded to meet code and standards. New system will monitor all areas of the fire house and outer buildings and meet future needs.																																																																						
2	PROJECT STATUS IF IN PROGRESS																																																																						
	Received a quote from a local contractor																																																																						
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4	DESCRIBE THE IMPACT ON DEPARTMENT OPERATING BUDGET (include cost estimate if applicable)																																																																						
	This project is to large to do with our operating budget. The cost of replacement is\$ 12,855 and should be done with the Capital Improvement Plan.																																																																						
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	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">FUNDING SOURCE</th> <th style="width: 10%;">APPROVED FUNDING TO DATE</th> <th style="width: 10%;">FY2025</th> <th style="width: 10%;">FY2026</th> <th style="width: 10%;">FY2027</th> <th style="width: 10%;">FY2028</th> <th style="width: 10%;">FY2029</th> </tr> </thead> <tbody> <tr> <td>1 Current Year Capital</td> <td></td> <td style="text-align: center;">15,000</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>2 Utility Budget/Sewer Cap Maint Fund</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3 Transfer to CNR</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4 Short/Long-term Bonds</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>5 LoCIP (detail in section 5 above)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>6 CNR Undesignated Fund Balance</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>7 Federal/State Grants (detail in section 5)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>8 Other Funding (detail in section 5 above)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TOTALS</td> <td style="text-align: center;">0</td> <td style="text-align: center;">15,000</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> </tbody> </table>	FUNDING SOURCE	APPROVED FUNDING TO DATE	FY2025	FY2026	FY2027	FY2028	FY2029	1 Current Year Capital		15,000					2 Utility Budget/Sewer Cap Maint Fund							3 Transfer to CNR							4 Short/Long-term Bonds							5 LoCIP (detail in section 5 above)							6 CNR Undesignated Fund Balance							7 Federal/State Grants (detail in section 5)							8 Other Funding (detail in section 5 above)							TOTALS	0	15,000	0	0	0	0
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INTEGRATED SECURITY SOLUTIONS LLC

388 Butlertown Road
Oakdale, CT 06370
860-701-0815

Proposal

Proposal Date: 10/2/2024
Proposal #: 1818.

Bill To:

Quaker Hill Fire Department
17 Old Colchester Road
Quaker Hill, CT 06375



Qty	Description	Rate	Total
	Upgrade the existing FCI 10-zone Fire Alarm System to include the following:		
1	FireLite ES200X Addressable Fire Alarm Control Panel with (1) Cell/Internet Communicator for Central Station monitoring	1,700.00	1,700.00
5	FireLite SD365 Smoke Detectors	125.00	625.00
24	FireLite H365 Heat Detector to replace existing detectors	110.00	2,640.00
1	FireLite H365 Heat Detector to install a new heat detector in the rear detached garage bay	110.00	110.00
6	FireLite BG12LX Addressable Pull Stations	140.00	840.00
2	MDF300 Dual Monitor Modules one for each sprinkler riser, main building and back garage	175.00	350.00
1	MMF301 with 40-Degree Low Temp Sensor for rear garage heat loss	100.00	100.00
8	System Sensor Horn Strobes to replace existing older style horns (This is an estimate on quantity)	65.00	520.00
	Miscellaneous electrical parts including conduit and cable as needed	250.00	250.00
	Labor to install, test and program	5,720.00	5,720.00
	Annual Central Station Monitoring via Internet and Cell Backup will be \$540 per year		
	Note: System subject to fire marshall approval.		
	Note: An external antenna may be required for cell signal. This will be at an added expense of \$475		
All material is guaranteed to be as specified. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, hurricane and other necessary insurance. Our workers are fully covered by Worker's Compensation insurance.		Subtotal	\$12,855.00
		Total	\$12,855.00

Acceptance of Proposal--The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment as outlined above

SIGNATURE _____

Date of Acceptance _____

**TOWN OF WATERFORD
CAPITAL PROJECT REQUEST FORM
2025-2026 FISCAL YEAR REQUEST**

DEPARTMENT/AGENCY

Fire Services

CONTACT PERSON

Steve Dubicki

PROJECT NAME

SCBA- breathing apparatus replacement

DEPARTMENT PRIORITY

1

1	DESCRIPTION AND JUSTIFICATION (describe the type, purpose & anticipated accomplishments of the project)						
	The Fire Department bottles for the SCBA-self contained breathing apparatus are expiring in the course of the next few years. This is a multi year project. We have one station remaining to complete the swap out of the bottles. These bottles have a life span of 15 years. F/Y 23-24 had 47 coming out of service. F/Y 24-25 we have 40 coming out of service. F/Y 25/26 has 20 coming out of service. Over the next two years we will be completed in this project. This project has to be completed for the Health and Safety of our personnel and to be compliant with our equipment.						
2	PROJECT STATUS IF IN PROGRESS						
	Two years into this project.						
3	LIST OTHER PROJECTS WITHIN YOUR DEPARTMENT OR ANOTHER DEPARTMENT THAT WILL BE IMPACTED BY THIS REQUEST						
	This project effects every one of our Fire Compaines. This is a major component of our air packs.						
4	DESCRIBE THE IMPACT ON DEPARTMENT OPERATING BUDGET (include cost estimate if applicable)						
	This is too large of a purchase to put inot a operating budget. This needs to be covered by the CIP plans as previous years.						
5	GRANT FUNDING/OTHER FUNDING, if applicable (detailed explanation of grant/other funding, including the amount, source of funding, status, town match, if any. Attach award letter if available)						
	N/A						
6	ATTACH PLAN ESTIMATE, SERVICE AREA MAP AND/OR OTHER SUPPORTING DOCUMENTATION (if none, simply state that in the area below)						
	see attached						
7	COST/FUNDING SOURCE						
	FUNDING SOURCE	APPROVED FUNDING TO DATE	FY2025	FY2026	FY2027	FY2028	FY2029
1	Current Year Capital		50,000				
2	Utility Budget/Sewer Cap Maint Fund						
3	Transfer to CNR						
4	Short/Long-term Bonds						
5	LoCIP (detail in section 5 above)						
6	CNR Undesignated Fund Balance						
7	Federal/State Grants (detail in section 5)						
8	Other Funding (detail in section 5 above)						
	TOTALS	0	50,000	0	0	0	0

**TOWN OF WATERFORD
CAPITAL PROJECT REQUEST FORM
2025-2026 FISCAL YEAR REQUEST**

DEPARTMENT/AGENCY

Fire Services

CONTACT PERSON

Steve Dubicki

PROJECT NAME

Cohanzie Fire Company Air Conditioning

DEPARTMENT PRIORITY

1

1	DESCRIPTION AND JUSTIFICATION (describe the type, purpose & anticipated accomplishments of the project)						
	Cohanzie Fire Company has through the wall A/C units that do not adequately cool the rooms. This would properly cool two spaces within the building. Some Fire Alarm relocating, wall repair and window repairs will need to be made also.						
2	PROJECT STATUS IF IN PROGRESS						
	Quotes from one vendor						
3	LIST OTHER PROJECTS WITHIN YOUR DEPARTMENT OR ANOTHER DEPARTMENT THAT WILL BE IMPACTED BY THIS REQUEST						
	N/A						
4	DESCRIBE THE IMPACT ON DEPARTMENT OPERATING BUDGET (include cost estimate if applicable)						
	This project is too large to do with an operating budget. A CIP plan is the best course of action for this project.						
5	GRANT FUNDING/OTHER FUNDING, if applicable (detailed explanation of grant/other funding, including the amount, source of funding, status, town match, if any. Attach award letter if available)						
	N/A						
6	ATTACH PLAN ESTIMATE, SERVICE AREA MAP AND/OR OTHER SUPPORTING DOCUMENTATION (if none, simply state that in the area below)						
	See attached						
7	COST/FUNDING SOURCE						
	FUNDING SOURCE	APPROVED FUNDING TO DATE	FY2025	FY2026	FY2027	FY2028	FY2029
1	Current Year Capital		15,000				
2	Utility Budget/Sewer Cap Maint Fund						
3	Transfer to CNR						
4	Short/Long-term Bonds						
5	LoCIP (detail in section 5 above)						
6	CNR Undesignated Fund Balance						
7	Federal/State Grants (detail in section 5)						
8	Other Funding (detail in section 5 above)						
	TOTALS	0	15,000	0	0	0	0

Stephen Dubicki Jr.

From: Stephen Dubicki Jr.
Sent: Tuesday, October 1, 2024 3:32 PM
To: Stephen Dubicki Jr.
Subject: FW: Cohanzie Station
Attachments: Mitsubishi Brochure 2023.pdf

From: Jonathan Duncklee <jduncklee@dunckleeinc.com>
Sent: Thursday, July 25, 2024 4:01 PM
To: Michael Howley <mhowley@waterfordct.org>
Subject: RE: Cohanzie Station

CAUTION: This email originated from outside of the organization.

Do not click links or open attachments unless you recognize the sender's email address and know the content is safe.

Hi Michael,
Here's your options for lounge and bunk room:

One outdoor unit with two indoor units installed as heat pump for \$12,171

Or

Two outdoor units two indoor units ac only \$10,366

Or

Two outdoor units two indoor units ac and heat pump \$11,257

12 year parts warranty 1 year labor warranty

Not included:

Electrical to outdoor units, removal of window sleeve units, moving fire alarm light in lounge

Please let me know your thoughts

From: Michael Howley <mhowley@waterfordct.org>
Sent: Saturday, July 13, 2024 4:14 PM
To: Jonathan Duncklee <jduncklee@dunckleeinc.com>
Subject: Re: Cohanzie Station

That works
Sent from my iPhone

On Jul 13, 2024, at 11:26 AM, Jonathan Duncklee <jduncklee@dunckleeinc.com> wrote:



Quote

(860) 442-0678

Quote # QT1850880
Date 08/26/2024
Expires 09/10/2024
Sales Rep Fratus, John
Shipping Method FedEx Ground
Customer Waterford Fire Marshal (CT)
Customer # C253670

Bill To
Waterford Fire Marshal (CT)
204 Boston Post Road
Waterford CT 06385
United States

Ship To
Waterford Fire Marshal (CT)
204 Boston Post Road
Waterford CT 06385
United States

Item	Alt. Item #	Units	Description	QTY	Unit Price	Amount
804722-01			CYL&VLV ASSY,CARB,45MIN,4500	28	\$1,625.00	\$45,500.00

Subtotal	\$45,500.00
Shipping Cost	\$0.00
Tax Total	\$0.00
Total	\$45,500.00

This Quotation is subject to any applicable sales tax and shipping and handling charges that may apply. Tax and shipping charges are considered estimated and will be recalculated at the time of shipment to ensure they take into account the most current information.

All returns must be processed within 30 days of receipt and require a return authorization number and are subject to a restocking fee.

Custom orders are not returnable. Effective tax rate will be applicable at the time of invoice.



QT1850880

**TOWN OF WATERFORD
CAPITAL PROJECT REQUEST FORM
2024-2025 FISCAL YEAR REQUEST**

DEPARTMENT/AGENCY

Waterford Fire services

CONTACT PERSON

Chief Michael J. Howley

PROJECT NAME

Company 3 Roof replacement

DEPARTMENT PRIORITY

1

1	DESCRIPTION AND JUSTIFICATION (describe the type, purpose & anticipated accomplishments of the project)						
	Goshen fire station roof has been giving us problems for the last three years. Contractor has been out making repairs/patches as needed. Both the flat roofing 2/3 of roof and pitched shingle roof 1/3 needs to be replaced. Contractor stating membrane material is at life end and showing signs of severe aging. The single ply materials are stretching, delaminating and tenting. This materials is becoming brittle and causing holes and getting worse. Leaks are being caused by voids in membrane. Leaks are causing damage on the interior insulation and tiles. Repairs have been made to carry us through the winter.						
2	PROJECT STATUS IF IN PROGRESS						
	Repairs have been made again in fall of FY 24 hoping this will get us through the winter months. Getting quotes/estimates for roof project for FY 25 budget.						
3	LIST OTHER PROJECTS WITHIN YOUR DEPARTMENT OR ANOTHER DEPARTMENT THAT WILL BE IMPACTED BY THIS REQUEST						
	Normal budget process will not cover cost of roof replacment project.						
4	DESCRIBE THE IMPACT ON DEPARTMENT OPERATING BUDGET (include cost estimate if applicable)						
	Budget process will not cover roof replacment. Working on estimates with contractors for CIP FY 25. Project estimates will be attached.						
5	GRANT FUNDING/OTHER FUNDING, if applicable (detailed explanation of grant/other funding, including the amount, source of funding, status, town match, if any. Attach award letter if available)						
	N/A						
6	ATTACH PLAN ESTIMATE, SERVICE AREA MAP AND/OR OTHER SUPPORTING DOCUMENTATION (if none, simply state that in the area below)						
	Attached						
7	COST/FUNDING SOURCE						
	FUNDING SOURCE	APPROVED FUNDING TO DATE	FY2025	FY2026	FY2027	FY2028	FY2029
1	Current Year Capital		60,000	60,000	65,000		
2	Utility Budget/Sewer Cap Maint Fund						
3	Transfer to CNR						
4	Short/Long-term Bonds						
5	LoCIP (detail in section 5 above)						
6	CNR Undesignated Fund Balance						
7	Federal/State Grants (detail in section 5)						
8	Other Funding (detail in section 5 above)						
	TOTALS	0	60,000	60,000	65,000	0	0