Emergency

JKS # 2008030	District	Facility	Todd County Central	
District Todd County	Code <u>551</u>	Name	School	Code <u>095</u>
I. DESCRIPTION AND S A. Check and complete to the second		POSED F s: teration (I	PROJECT Describe)	Organization Plan
5. <u>x</u>		shings Pro	ocurement (Describe)	Replace bleachers in
a. Site Ab. A sitec. Locati		Ex I in accord	ance with 702 KAR 4:0 Initial	Number of Acres 150 regulations s of District Superintendent (N)
	ing submitted for (representation) tem Number tot listed on Facility	efer to cur	X	NEED TO BE AMENDED
C. Please provide a com			ed project. nnasium with new blea	chers
		, , , , , , , , , , , , , , , , , , ,		
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D. Program Square Footage			
Complete for new facilities, ad	ditions and ren	ovations.	
New Facility:			
PreschoolCa	Elementary	Middle High Gross	Alternative Center
	Total Net Program	fter total program square footage entered	Total Net Program
Number	Sq.Ft.	Number	Sq.Ft.
Instructional: Preschool Classroom (P) Elementary Classroom (E) Middle/High Classroom (MH) Special Education (Self-Contained) (SE) Resource-Elementary (ER) Resource-Middle/High (MHR) Art-Elementary (ARE) Art-Middle/High (AR) Band (BA) Vocal Music (MUV) Music Elementary (MUE) Computer-Elementary (COE) Computer-High (COH) Science Room (SCR) Science Lecture Lab (SCL) Auditorium (AU) Library (L) Physical Education (PE) Agriculture (AG) Business Education (BE) Developmental Occupations (DO) Marketing Education (ME) Home Economics (HE) Industrial Technology (IT) Drafting (DRF)		General Office (GO) Staff Office (SO) Administrative Area (AD) Guidance Office (GUO) Guidance Reception (GUR) Custodial Receiving (CR) Site Based Office (SBO) Site Based Conference (SBC) Family Resource Area (FRA) First Aid with Toilet (FA) Records Room (RR) Workroom (WR) Kitchen (K) Cafeteria (C) Mechanical Room (MR) Other: Bay Bus Garage (BU) Central Office (C) Board Room (BR) Central Storage Facility (CSF) Other Other Other	
Other Other Other Other		For Phased Projects: Estimated Total Net Program Square Footage (Include <u>all</u> Phases) Estimated Total Construction Cost (Include <u>all</u> Phases) Estimated Contract Date of Final Phase	
		This BG-1 is for Phase of	Phases.

	# 2008030 OOL DISTRICT: Todd County	Initial:		X	Revised:	BG#	
II.	PROPOSED PLAN TO FINANCE			^			
A.	Statement of Probable Cost:		В.	Fun	ds Available		
1. 2. 3. 4. 5. 6. 7. 8. 9. 10.	Total Construction Cost Architect/Engineer Fee Construction Manager Fee Bond Discount Fiscal Agent Fee Contingencies Site Acquisition Equipment/Furnishings Equipment/Computers Technology Network System (KETS) Other	\$ 8,250.00 \$ 3,250.00 \$ 72,000.00 \$ 500.00	1. 2. 3. 4. 5. 6. 7. 8. 9.	SFC SFC Loca Cas Cas		\$ 84,000.00	
	Total Estimated Cost	\$ 84,000.00		Tota	al Funds Available	\$ 84,000.00	
Correspond to actual bids received prior to the signing of construction contracts. TO BE COMPLETED ON INITIAL & REVISED APPLICATION: The signing of this financial document certifies the above stated funds are available and designated for this project during this fiscal year. Superintendent Chairman ORIGINAL SIGNATURES REQUIRED NOTE: Any district anticipating the financing of this and/or other projects in a combined school revenue bond should discuss the financing with the Director of Division Finance.							
TO BE COMPLETED ON INITIAL & REVISED APPLICATION: Financial Approval: Tentative approval based upon financial information provided this office in support of projected cost. Comments:			TO BE COMPLETED ON INITIAL APPLICATION: This building project application is hereby approved according to the condition outlined in the application. You should now proceed in accordance with the attached checklist. Comments:				
Director/Branch Manager, Division of Finance Date:			Associate Commissioner, District Support Services Date:				
TO BE COMPLETED ON INITIAL & REVISED APPLICATION: Financial Approval: Tentative approval based upon financial information provided this office in support of projected cost. Comments:		approval This bound office in according should check	TO BE COMPLETED ON INITIAL APPLICATION: This building project application is hereby approved according to the condition outlined in the application. You should now proceed in accordance with the attached checklist. Comments:				
Director/Branch Manager, Division of Finance Date:			Associate Commissioner, District Support Services Date:				