



COUNTY OF NEVADA CAPITAL ASSET BUDGET REQUEST

TYPE OF REQUEST:

- ☐ Infrastructure Improvements and Preservation
☒ Building Structures & Improvements - Please identify building: _____
☐ Land: Rights of Way, Easements & Land Improvements
☐ Equipment: Technological - *Information Systems approval date:* _____
☐ Equipment: Automotive
☐ Equipment: Office, Furniture & Fixtures
☐ Equipment: Other:

Fiscal Year: 2020-21
 Dept Name: Housing & Community Svcs
 Fund: 1589
 SBU: 50601
 Office2: 451
 Sub-Service: 7000
 PCN: 451CVRSP
 Acct Code: 540300

IMPORTANCE OF CAPITAL ASSET: ☐ Urgent ☒ Necessary ☐ Desirable

PRIORITY RANKING OF CAPITAL ASSET: _____ out of _____ Total Department Requests

JUSTIFICATION FOR CAPITAL ASSET (Attach additional pages as necessary)

Trailers are being donated by City of Los Angeles and will be used for COVID isolation purposes.

FUNDING SOURCE FOR CAPITAL ASSET

1. Is this grant-funded?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Granting Agency:	BOS Reso. # Accepting Grant:
		Other funding source:	
2. What is the general fund and/or other fund balance dollar impact? <input type="checkbox"/> None <input type="checkbox"/> As follows:			
3. Who will technically own this asset? <input checked="" type="checkbox"/> County of Nevada <input type="checkbox"/> Granting Agency Notes regarding ownership:			
Notes regarding funding (including deadlines)			

CAPITAL ASSET ITEMIZED COSTS - Estimated

Item	Quantity		Unit Cost	Sales Tax	Shipping	Installation	Other Cost	Total Cost
26 Ft Coleman Lantern LT	1	@	\$25,000	\$1,813	\$2,000			\$28,813
25 Ft Keystone Cougar	1	@	\$25,000	\$1,813	\$2,000			\$28,813
25 Ft Keystone Hideout	1	@	\$25,000	\$1,813	\$2,000			\$28,813
24 Ft Keystone Bullet	1	@	\$25,000	\$1,813	\$2,000			\$28,813
27 Ft Heartland Pioneer	1	@	\$25,000	\$1,813	\$2,000			\$28,813
25 Ft Heartland Pioneer	1	@	\$25,000	\$1,813	\$2,000			\$28,813
TOTAL:								\$172,875

Please attach documentation (ISSB approval minutes, quotes, etc.)

APPROVED BY:

Prepared by: S. Doyle Date: 9/14/2020
 Phone: 265-1401

Dept. Head Signature: _____ Date: _____
 CEO Analyst Signature: _____ Date: _____

Notes: _____

Initials _____ Date _____

☐ Denied

☐ Approved \$ _____

Capital Asset Approval # _____