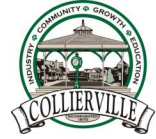


Town of Collierville Justification Report



Capital Investment Projects & 900 Accounts

Project Name _____

Department _____

Date _____ **Account Number** _____

Approved Budgeted Amount _____ **Estimated Construction Amount as of _____** _____

Dept. Project Manager _____

Requested BMA Date _____ **Requested Bid Date** _____

Arch / Eng Firm _____ **TOC Number** _____

Issues to be addressed _____

Background / History _____

Justification / Benefits _____

Project Budget	Design _____	Access / Parking _____
	Construction _____	Utility Relocation _____
	Landscape _____	Furnishings _____
	Irrigation _____	Land / ROW _____