

# **INTEGRATED BUDGET INFORMATION SYSTEM (IBIS) USER GUIDE**

## **WORKSHEET III Capital Improvements**

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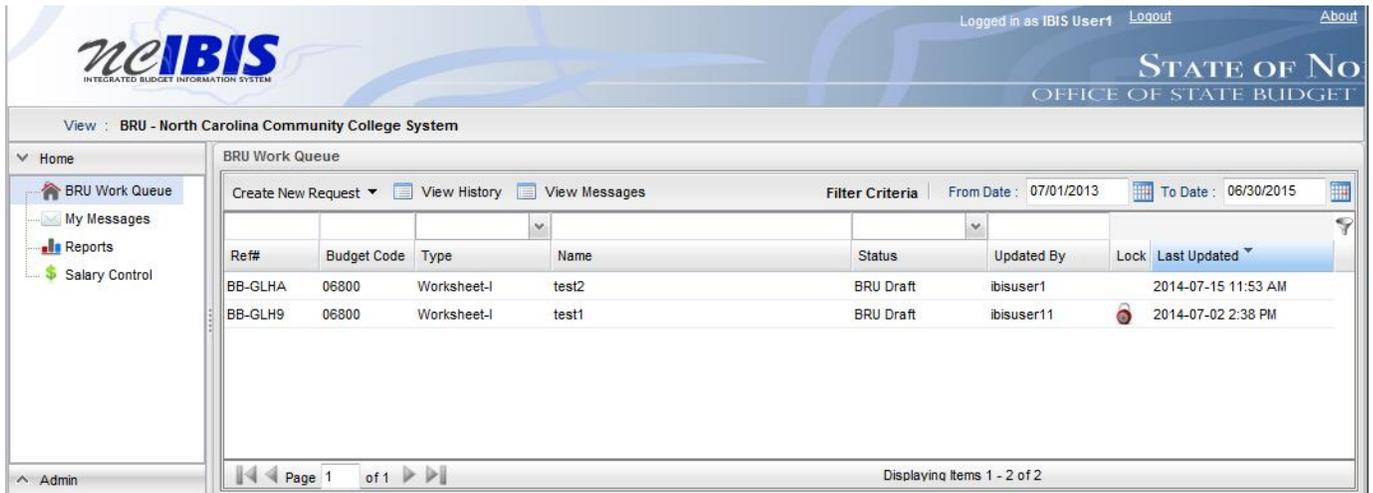
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## PREFACE

This training guide describes how to use IBIS to complete a Capital Improvement Request Worksheet III form. For policy guidance, please consult instructions for preparation of the Governor’s recommended budget that are published before each budget cycle on OSBM’s website.

## WORKSHEET III - Capital Improvements

Once you have successfully logged into IBIS, you should see the Work Queue page similar to what is shown below. This could be a BRU, Agency or OSBM Work Queue page depending on your log-in credentials.

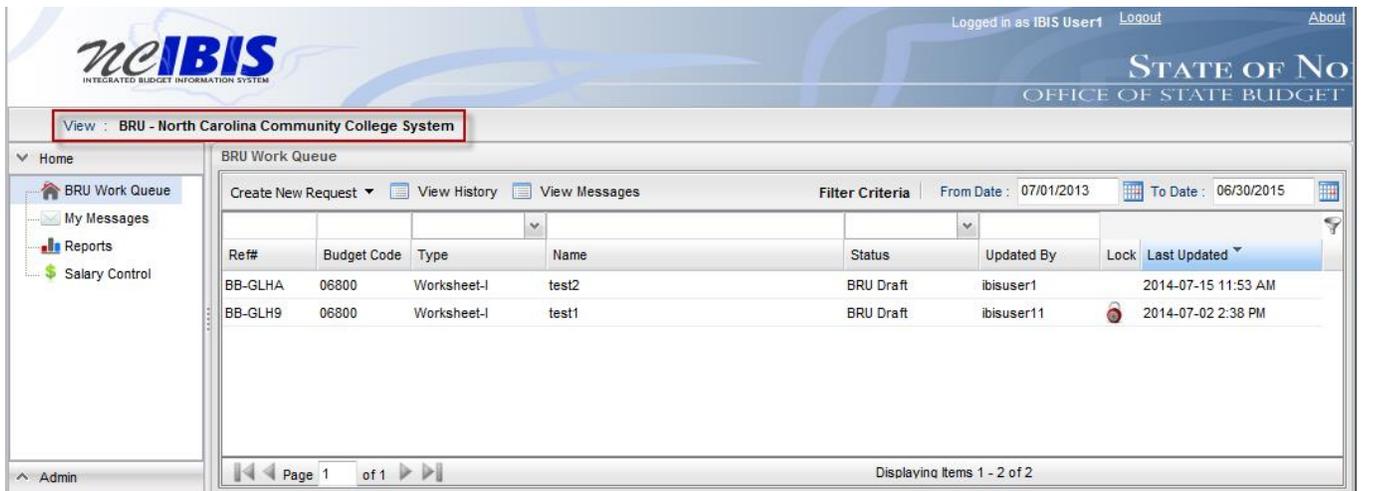


View : BRU - North Carolina Community College System

Ref#	Budget Code	Type	Name	Status	Updated By	Lock	Last Updated
BB-GLHA	06800	Worksheet-I	test2	BRU Draft	ibisuser1		2014-07-15 11:53 AM
BB-GLH9	06800	Worksheet-I	test1	BRU Draft	ibisuser11		2014-07-02 2:38 PM

Page 1 of 1 | Displaying Items 1 - 2 of 2

Find the View indicator in the upper left-hand corner of the page. The field should contain only your BRU, Agency or OSBM. If you have access to multiple departments and/or agencies, these will appear in a drop-down list in this field. In the example below, the user is logged in as the North Carolina Community College System.



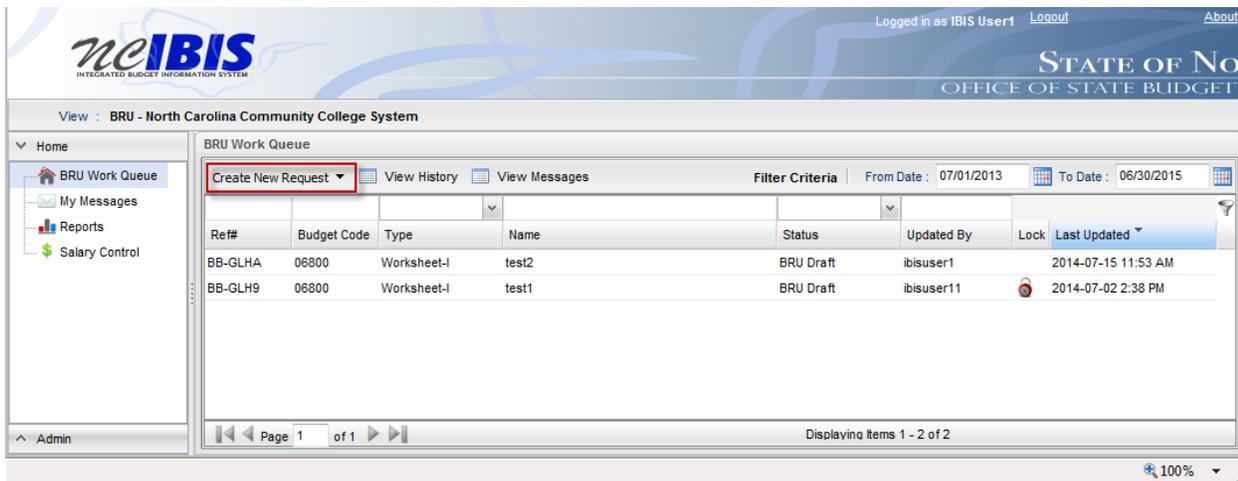
View : BRU - North Carolina Community College System

Ref#	Budget Code	Type	Name	Status	Updated By	Lock	Last Updated
BB-GLHA	06800	Worksheet-I	test2	BRU Draft	ibisuser1		2014-07-15 11:53 AM
BB-GLH9	06800	Worksheet-I	test1	BRU Draft	ibisuser11		2014-07-02 2:38 PM

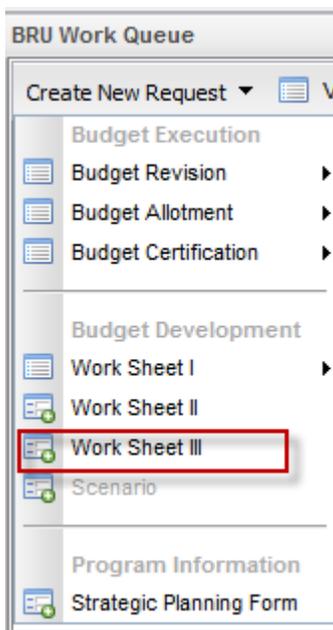
Page 1 of 1 | Displaying Items 1 - 2 of 2

### Create a New Worksheet III

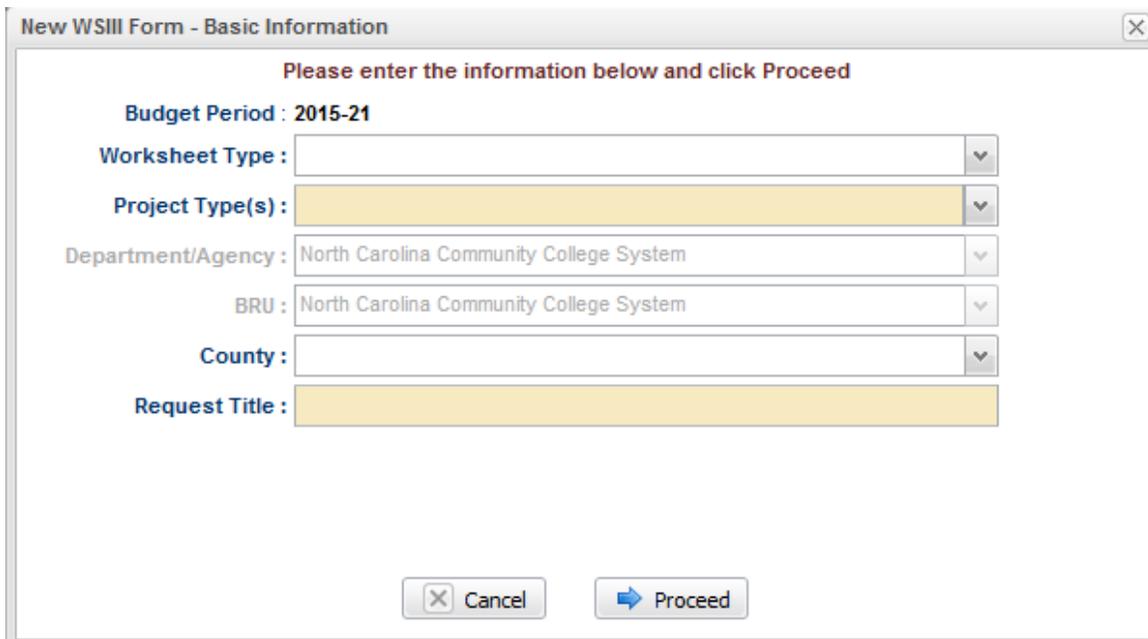
To create a new Worksheet III form, click on the **Create New Request** dropdown list.



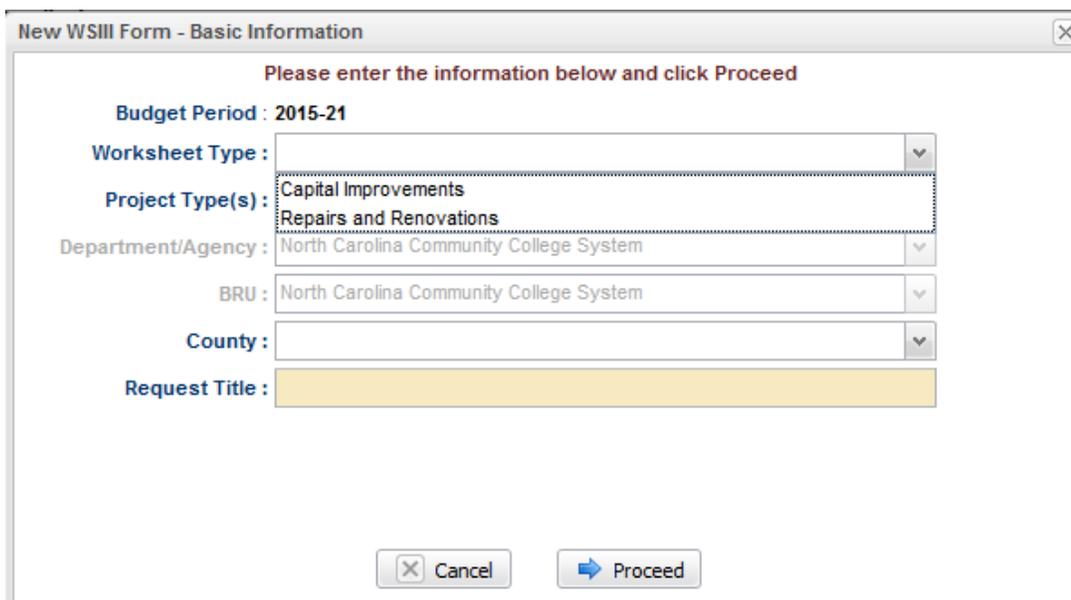
When you click on 'Create New Request', the drop-down will display the following options as shown below. Click on the "Worksheet III" option.



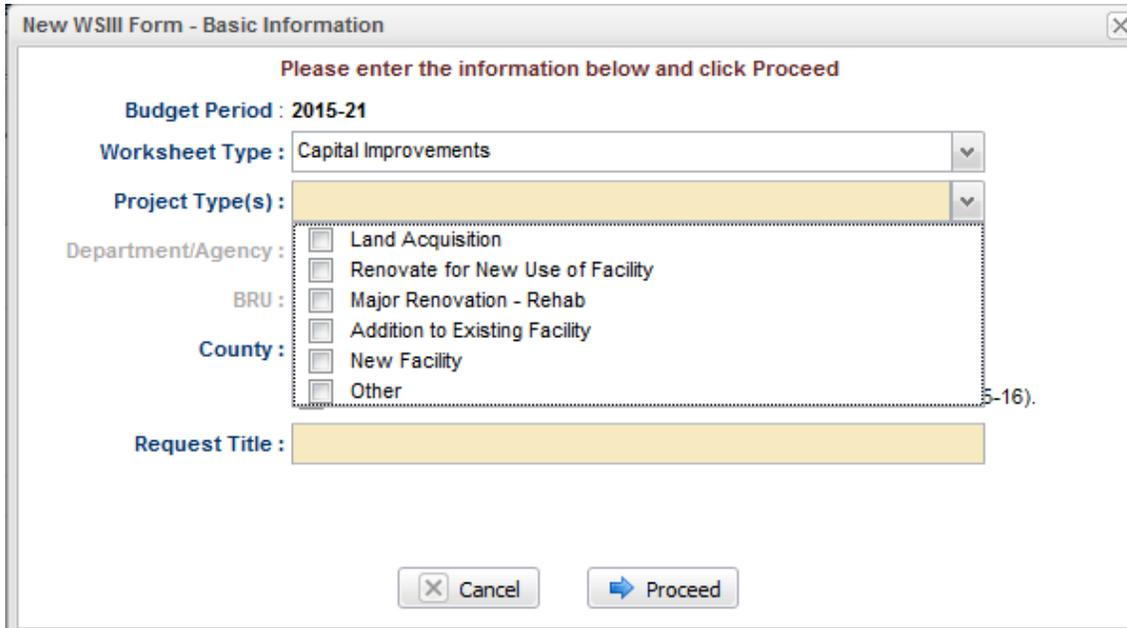
Once you click the Worksheet III option, a New WSIII Form – Basic Information window appears as shown in the following screenshot.



You will need to complete the basic information. The 6-year budget period is set for you. The second option is to select the Worksheet Type. Click on the dropdown arrow and you will see Capital Improvements and Repairs and Renovations options. Select Capital Improvements. Once you select an option the list will disappear and your selection will be displayed in the field.



The third field allows the selection of **Project Type(s)**. Select the categories that best describe the requested project. When you are finished making your selection(s), click your mouse pointer anywhere outside the selection box, or press your Tab button to move to the next field.



New WSIII Form - Basic Information

Please enter the information below and click Proceed

Budget Period : 2015-21

Worksheet Type : Capital Improvements

Project Type(s) :

Department/Agency :  Land Acquisition

BRU :  Renovate for New Use of Facility

County :  Major Renovation - Rehab

Addition to Existing Facility

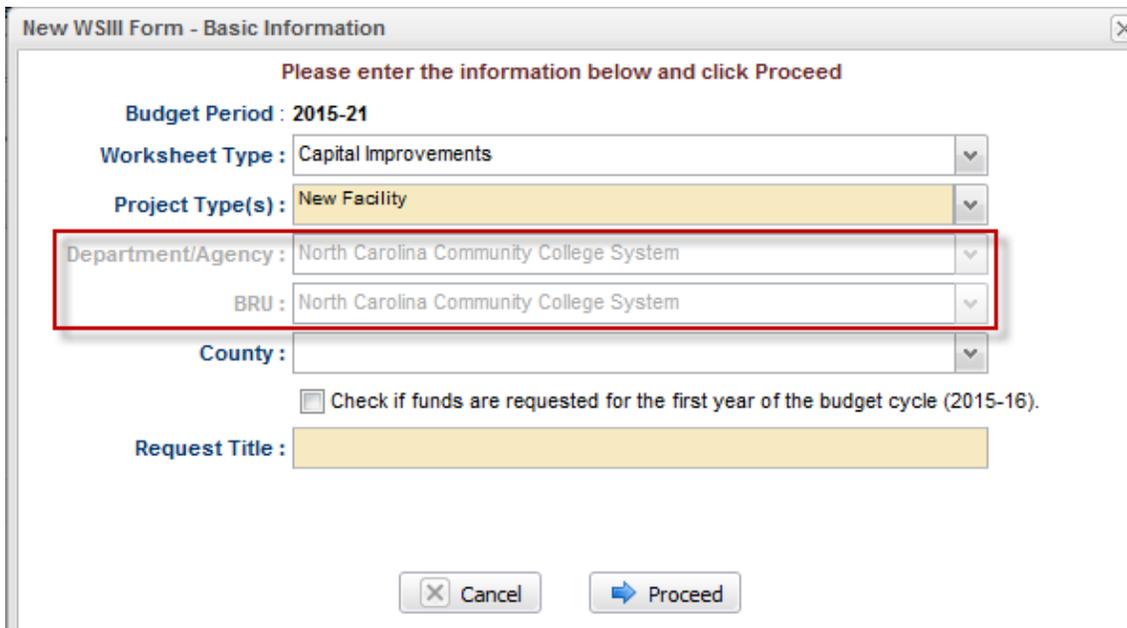
New Facility

Other

Request Title :

Cancel Proceed

Note the next two fields are labeled **Department/Agency** and **BRU**. In most cases, access is restricted to a single department/agency so it will default to your Department/Agency and BRU. If a user has access to multiple departments/agencies and BRUs, a dropdown option will appear for selection.



New WSIII Form - Basic Information

Please enter the information below and click Proceed

Budget Period : 2015-21

Worksheet Type : Capital Improvements

Project Type(s) : New Facility

Department/Agency : North Carolina Community College System

BRU : North Carolina Community College System

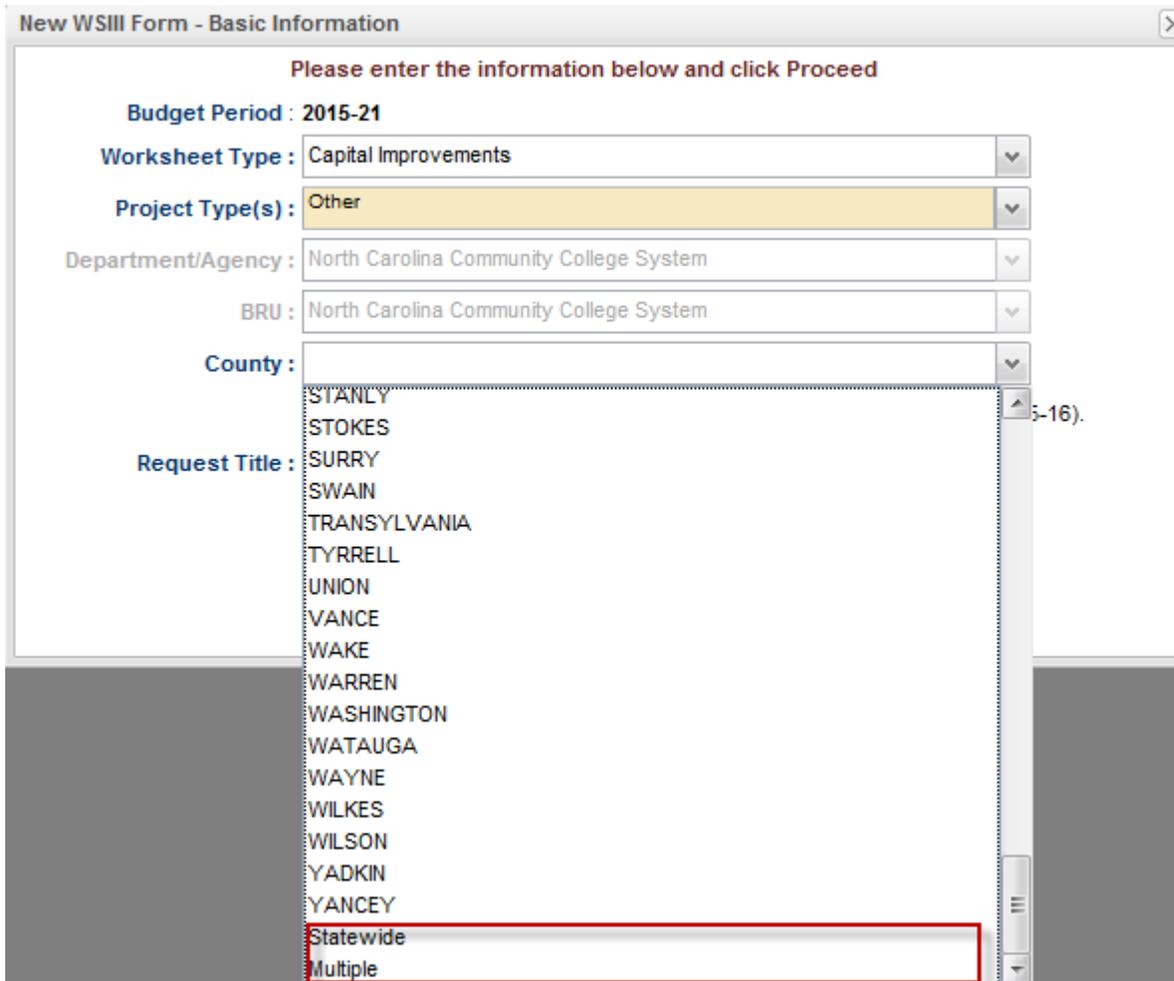
County :

Check if funds are requested for the first year of the budget cycle (2015-16).

Request Title :

Cancel Proceed

Select from the drop down menu the **county** in which the requested project is located; or select either “Statewide” or “Multiple” if appropriate.



New WSIII Form - Basic Information

Please enter the information below and click Proceed

Budget Period : 2015-21

Worksheet Type : Capital Improvements

Project Type(s) : Other

Department/Agency : North Carolina Community College System

BRU : North Carolina Community College System

County :

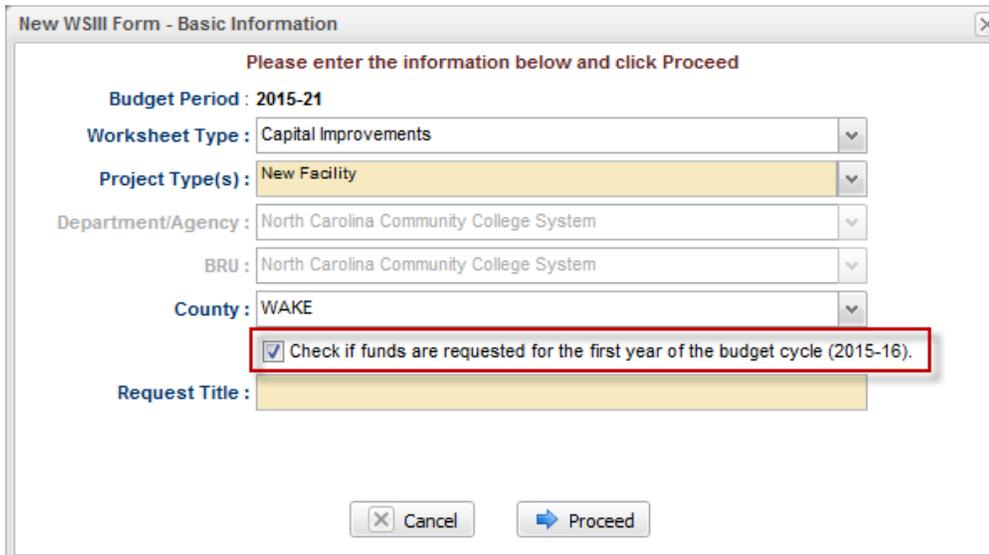
Request Title :

- STANLY
- STOKES
- SURRY
- SWAIN
- TRANSYLVANIA
- TYRRELL
- UNION
- VANCE
- WAKE
- WARREN
- WASHINGTON
- WATAUGA
- WAYNE
- WILKES
- WILSON
- YADKIN
- YANCEY
- Statewide
- Multiple

5-16).

The next item is an optional checkbox: **Check if funds are requested for the first year of the budget cycle (2015-16)**. Checking this box will allow entry of dollar amounts to the first year of the budget cycle on the request, and will also cause data entry controls to appear on the Basic Information tab.

For a short session, this box will be unchecked by default and entry of budget dollar amounts for the first year of the budget cycle will be prohibited. For this example, we're going to mark the checkbox.



New WSIII Form - Basic Information

Please enter the information below and click Proceed

Budget Period : 2015-21

Worksheet Type : Capital Improvements

Project Type(s) : New Facility

Department/Agency : North Carolina Community College System

BRU : North Carolina Community College System

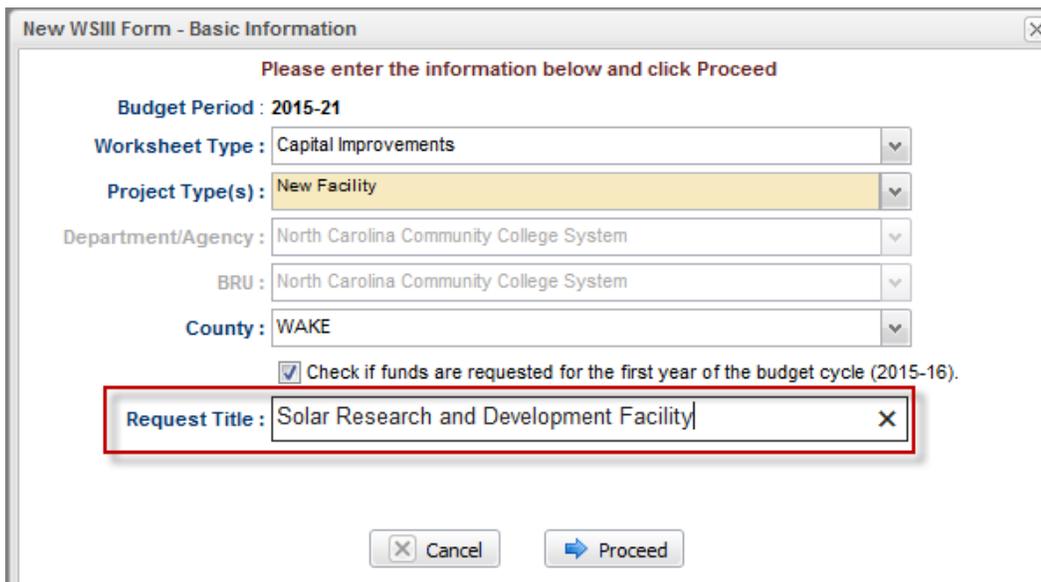
County : WAKE

Check if funds are requested for the first year of the budget cycle (2015-16).

Request Title :

Cancel Proceed

Enter a descriptive **title** of the requested project. If the request is for multiple facilities across the state, please include this in the title. Please note there is a 255 character limit for this field. Where possible, please do not use acronyms.



New WSIII Form - Basic Information

Please enter the information below and click Proceed

Budget Period : 2015-21

Worksheet Type : Capital Improvements

Project Type(s) : New Facility

Department/Agency : North Carolina Community College System

BRU : North Carolina Community College System

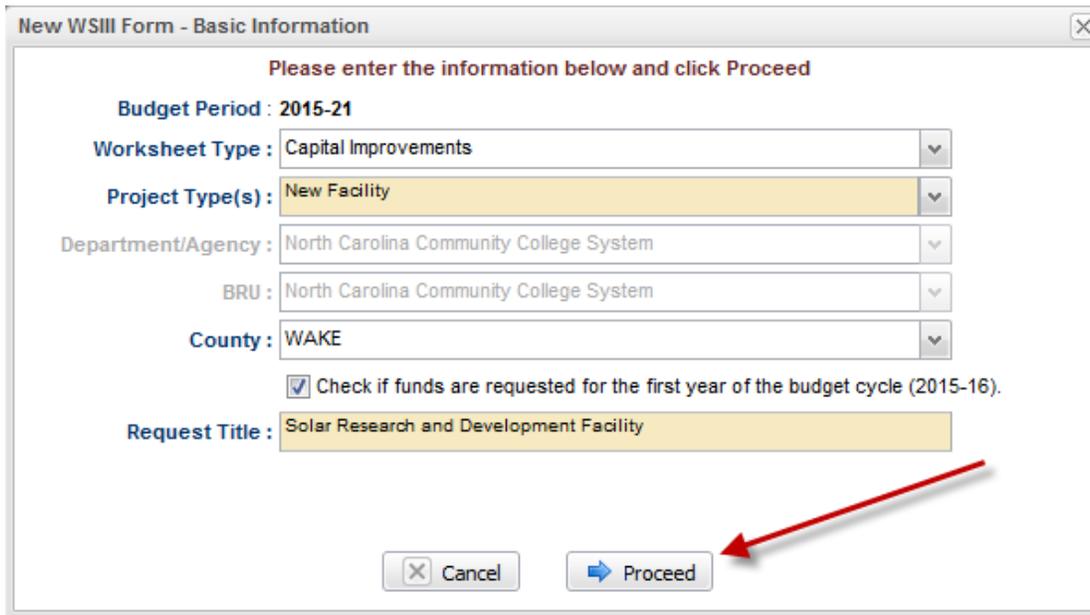
County : WAKE

Check if funds are requested for the first year of the budget cycle (2015-16).

Request Title : Solar Research and Development Facility

Cancel Proceed

Clicking on the Cancel button  will close the window. Nothing will be saved and the Work Queue will reappear. If all entries are satisfactory and there is no need to cancel the form, bypass this step. Click on the **Proceed** button as shown below.



New WSIII Form - Basic Information

Please enter the information below and click Proceed

Budget Period : 2015-21

Worksheet Type : Capital Improvements

Project Type(s) : New Facility

Department/Agency : North Carolina Community College System

BRU : North Carolina Community College System

County : WAKE

Check if funds are requested for the first year of the budget cycle (2015-16).

Request Title : Solar Research and Development Facility

Once Proceed is clicked, a Worksheet III - Capital Improvements form will open as shown below. The form's four tabs (**Basic Information**, **Request Detail**, **Project Criteria** and **Attachments**) will appear in the upper left corner of the screen. To navigate to any of the tabs simply click on the appropriate tab title and that tabs data will appear.

WS III - Capital Improvements: ( Title:Solar Research and Development Facility BRU:North Carolina Community College System )

UnLock Form

Status: BRU Draft

Basic Information | Request Detail | Project Criteria | Attachments/References

Budget Period : 2015-21  
 Priority :  ?  
 Worksheet Type : Capital Improvements  
 Project Type : New Facility  
 Department/Agency : North Carolina Community College System  
 BRU : North Carolina Community College System  
 Division/Institution : Not Applicable  
 County : WAKE  
 Title : Solar Research and Development Facility ?

Screen ID : WSIII-0  
 IBIS ID : GO4P

### General Information

Is this request funded from 100% NGF? :  Yes  No  
 Will project replace leased space with state-owned facilities? :  Yes  No  
 Has advanced planning been done on this project? :  Yes  No  
 Will project replace an existing facility? :  Yes  No  
 Has there been a prior partial funding of this project? :  Yes  No

### Budget Details

Is the proposed site currently owned by the State of North Carolina? :  Yes  No  
 State Property Number: 1- County :  Complex :  Asset ID :

**Named Attachments:**

Project Description and Justification: Include short description of type, nature and extent of work required, the need for the project, and

## BASIC INFORMATION TAB

### Basic Information

The Basic Information screen comes to the forefront since it is the default tab when creating a new or opening an existing form.

The information on the basic information tab is largely carried forward from the initialization screen when the form was first created, which includes the following non-editable fields – budget period, worksheet type, project type, department/agency, BRU, and county.

Enter the Department **priority** for the specific request; it is a required field. IBIS will not allow duplicate priorities. For example, IBIS will only allow a department to have one priority identified as #1 for each type of request (i.e., Capital Improvements and Repairs and Renovations).

WS III - Capital Improvements: ( Title:Solar Research and Development Facility BRU:North Carolina Community College System )

Status: BRU Draft

Basic Information Request Detail Project Criteria Attachments/References

Budget Period : 2015-21

Priority :  ?

Worksheet Type : Capital Improvements

Project Type : New Facility

Department/Agency : North Carolina Community College System

BRU : North Carolina Community College System

Division/Institution : Not Applicable

County : WAKE

Title : Solar Research and Development Facility ?

### General Information

Is this request funded from 100% NGF? :  Yes  No

Will project replace leased space with state-owned facilities? :  Yes  No

The **Division/Institution** field may be grayed out for agencies to which it does not apply. The Division may be selected from the drop-down box if it is appropriate for the agency making the request. It is used for reference purposes only and does not have a bearing on budgeting.

WS III - Capital Improvements: ( Title:Solar Research and Development Facility BRU:North Carolina Community College System )

Status: BRU Draft

Basic Information | Request Detail | Project Criteria | Attachments/References

Budget Period : 2015-21  
 Priority :  ?  
 Worksheet Type : Capital Improvements  
 Project Type : New Facility  
 Department/Agency : North Carolina Community College System  
 BRU : North Carolina Community College System  
 Division/Institution : Not Applicable  
 County : WAKE  
 Title : Solar Research and Development Facility ?

The **title** entered upon creation of the form will be pre-populated in this field. You may edit this field at any time the form is editable within the IBIS workflow.

WS III - Capital Improvements: ( Title:Solar Research and Development Facility BRU:North Carolina Community College System )

Status: BRU Draft

Basic Information | Request Detail | Project Criteria | Attachments/References

Budget Period : 2015-21  
 Priority :  ?  
 Worksheet Type : Capital Improvements  
 Project Type : New Facility  
 Department/Agency : North Carolina Community College System  
 BRU : North Carolina Community College System  
 Division/Institution : Not Applicable  
 County : WAKE  
 Title : Solar Research and Development Facility ?

**General Information**

Is this request funded from 100% NGF? :  Yes  No  
 Will project replace leased space with state-owned facilities? :  Yes  No  
 Has advanced planning been done on this project? :  Yes  No

## General Information

The general information section on the basic information tab contains several key questions related to the construction project. By default, the questions are pre-populated with a “No” answer.

WS III - Capital Improvements: ( Title: Solar Research and Development Facility BRU: North Carolina Community College System

Status: BRU Draft

Basic Information Request Detail Project Criteria Attachments/References

Budget Period : 2015-21  
 Priority : 1 ?  
 Worksheet Type : Capital Improvements  
 Project Type : New Facility  
 Department/Agency : North Carolina Community College System  
 BRU : North Carolina Community College System  
 Division/Institution : Not Applicable  
 County : WAKE  
 Title : Solar Research and Development Facility ?

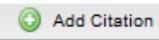
**General Information**

Is this request funded from 100% NGF? :  Yes  No  
 Will project replace leased space with state-owned facilities? :  Yes  No  
 Has advanced planning been done on this project? :  Yes  No  
 Will project replace an existing facility? :  Yes  No  
 Has there been a prior partial funding of this project? :  Yes  No

- **Is this request funded from 100% NGF?**  
This field is automatically populated to “No”. Please select “Yes” if appropriate.
- **Will project replace leased space with state-owned facilities?**  
This field is automatically populated to “No”. Please select “Yes” if appropriate.
- **Has advanced planning been done on this project?**  
This field is automatically populated to “No”. Please select “Yes” if appropriate.
- **Will project replace an existing facility?**  
This field is automatically populated to “No”. Please select “Yes” if appropriate.

- **Has there been a prior partial funding of this project?**

If “Yes” is selected, you’re presented with a section that allows you to enter the amount (only numbers and decimals allowed) and corresponding session law citation for each individual prior authorization. Click the

 button to begin adding the amounts and citations. Click the  button to delete an entry.

**General Information**

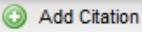
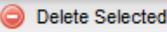
Is this request funded from 100% NGF? :  Yes  No

Will project replace leased space with state-owned facilities? :  Yes  No

Has advanced planning been done on this project? :  Yes  No

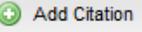
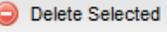
Will project replace an existing facility? :  Yes  No

Has there been a prior partial funding of this project? :  Yes  No

Amount	Session Law Citation
No items to show.	

In the example below, “59500” was entered for the amount and “S.L. 2011-00, Section 1” was entered for the Citation. **Please do not enter a dollar sign or commas in the Amount field. The IBIS system will automatically format the amount with a dollar sign and commas. You are allowed to enter decimals in the Amount field.**

Amount	Session Law Citation
\$59,500.00	S.L. 2011-00, Section 1

### Budget Details

The budget details section appears only on forms for which checkbox “Check if funds are requested for the first year of the budget cycle” is selected in the New WSIII Form – Basic Information dialog box.

By default, the first question of this section, “Is the proposed site currently owned by the State of North Carolina?” is not prepopulated with an answer but the question is **mandatory**; please select “Yes” or “No”.

#### General Information

Is this request funded from 100% NGF? :  Yes  No

Will project replace leased space with state-owned facilities? :  Yes  No

Has advanced planning been done on this project? :  Yes  No

Will project replace an existing facility? :  Yes  No

Has there been a prior partial funding of this project? :  Yes  No

Amount	Session Law Citation
\$59,500.00	S.L. 2011-00, Section 1

#### Budget Details

Is the proposed site currently owned by the State of North Carolina? :  Yes  No

State Property Number: 1- County :       Complex :       Asset ID :

**Named Attachments:**

- OC-25 Cost Estimate
- FCAP Report
- Land Acquisition Plan (optional)

**Project Description and Justification:** Include short description of type, nature and extent of work required, the need for the project, and

☰ ☰ ☰ ☰    **B**    *I*    U

Export PDF
Save Draft
Save & Close
Ready To Submit
Delete Request

The data controls that appear in the budget details section of the form differ based on a “Yes” or “No” answer to question “**Is the proposed site currently owned by the State of North Carolina?**” When answer is “Yes”, the question “Where is the location?” is added to the form as shown below.

**Budget Details**

Is the proposed site currently owned by the State of North Carolina? :  Yes  No

Where is the location?:

State Property Number: 1- County :  Complex :  Asset ID :

**Named Attachments:**

OC-25 Cost Estimate

1 | III

Export PDF Save Draft Save & Close Ready To Submit Delete Request

When answer is “No”, the questions “**Has this proposed site been approved for purchase by the Office of State Property?**” and “**Where is the proposed location?**” are presented as shown below. These two questions are mandatory.

**Budget Details**

Is the proposed site currently owned by the State of North Carolina? :  Yes  No

Has this proposed site been approved for purchase by the Office of State Property? :  Yes  No

Where is the proposed location?:

State Property Number: 1- County :  Complex :  Asset ID :

The property information highlighted below is also mandatory. Please answer accordingly.

**Budget Details**

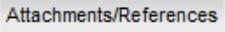
Is the proposed site currently owned by the State of North Carolina? :  Yes  No

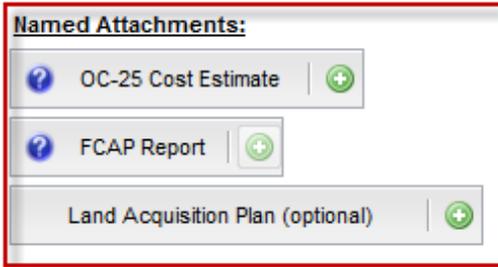
Has this proposed site been approved for purchase by the Office of State Property? :  Yes  No

Where is the proposed location?:  X

State Property Number: 1- County :  Complex :  Asset ID :

### Named Attachments

The next section of budget details is Named Attachments. Clicking the green icon  to the right of any of the attachment icons allows you to browse and select a file to attach to the request. Please note all named attachments will be listed and viewable from the Attachments/References tab  at the top of the form.



- **OC-25 Cost Estimate**

The OC-25 Cost Estimate is a mandatory attachment

- **Land Acquisition Plan**

The Land Acquisition Plan is optional

- **FCAP Report**

The ability to attach a Facility Condition Assessment Program (FCAP) Report is disabled unless 0, 1, or 2 is provided as an answer to the first health and safety question on the Project Criteria tab as shown below.

Basic Information | Request Detail | **Project Criteria** | Attachments/References

Health and Safety Considerations?  Yes  No

If the project corrects a deficiency documented by FCAP, enter the FCAP Correction Priority

Enter Description and Justification of Health and Safety

0

1

2

3-6

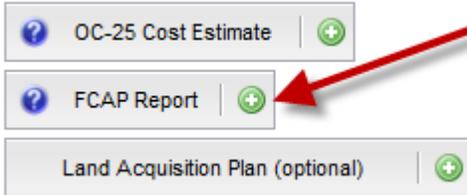
Federal/State Mandate?  Yes  No

Critical Timing?  Yes  No

Strategic Alignment?  Yes  No

Once answer is “Yes” to the Health and Safety question, and if 0, 1, or 2 is selected as the FCAP Correction Priority, the ability to attach an FCAP Report is enabled and is mandatory.

**Named Attachments:**



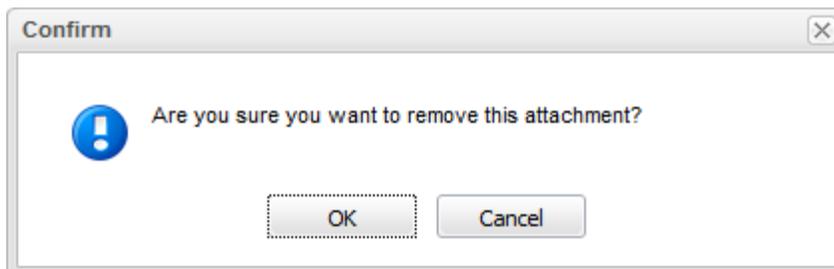
**Delete a Named Attachment**

To delete a named attachment, click on the delete attachments icon  next to the name of the attachment you want to delete.

**Named Attachments:**



Once you click on the delete attachment icon, you will be presented with a confirm message as shown below. Click “OK” to delete the attachment or “Cancel” to cancel the deletion.



The last portion of the Basic Information section of the report is the mandatory **Project Description and Justification**. Please summarize the need for the project and the expected impact. Text can also be copied and pasted in this field from other applications such as Microsoft Word, which will preserve formatting from that application.

**Project Description and Justification: Include short description of type, nature and extent of work required, the need for the project, and expected**

## REQUEST DETAIL TAB



Click on the Request Detail tab at the top of the form to bring it to the forefront.

WS III - Capital Improvements: ( Title: Solar Research and Development Facility BRU:500-North Carolina Community College System )

UnLock Form

Status: BRU Draft

Basic Information **Request Detail** Project Criteria Attachments/References

Screen ID : WSIIII-1  
IBIS ID : GO4P

**Requirements** ?

Edit Row Cancel Edit

Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Update
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total	
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

**Receipts** ?

Edit Row Remove Row(s) Cancel Edit

Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt	Total	Add
Description	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total	
No items to show.								

**Summary**

	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total
Total Requirements	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total Receipts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Appropriation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Estimated Project Schedule (dates):**

Begin Design :  Begin Construction :  Completion :  Occupancy :

Does the requested project impact the operating budget? :  Yes  No

If yes, describe:

4

Export PDF Save Draft Save & Close Ready To Submit Delete Request

## REQUIREMENTS

The first section is for Requirements. This section has both an Edit Row button and a Cancel Edit button as shown below. Both buttons can only be utilized once rows have been created

**Requirements**

### Add Requirements

Requirements for the request must be aggregated to a single line for entry, therefore, there is only one requirement line allowed and it is prepopulated with zeros. To add a row of data, click on the single row of data as highlighted below.

**Requirements**

<input type="button" value="Edit Row"/>		<input type="button" value="Cancel Edit"/>							
Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		<input type="button" value="Update"/>		
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total			
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			

Then click **Edit Row**.

**Requirements**

<input type="button" value="Edit Row"/>		<input type="button" value="Cancel Edit"/>							
Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		<input type="button" value="Update"/>	
Description	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	Total		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

Once Edit Row is clicked, you will see the contents of that single row populate the editable section at the top of the grid. Also notice the Cancel Edit and Update buttons have been enabled and no longer greyed out. This indicates you will be able to update the row once you've completed entering data, or you may cancel the edit if you wish.

Requirements?

Edit Row	Cancel Edit							Update
0	0	0	0	0	0			
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total		
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

To enter requirements, click into each column of the requirements row to enter a dollar amount for each year of the 6-year capital planning period. Remember to either click the "x" in the fields to remove its previous contents, or take your mouse and highlight the data and overwrite it with new data.

Requirements?

Edit Row	Cancel Edit			
10500	x	0	0	0
2015-16	2016-17	2017-18		
\$0.00	\$0.00	\$0.00	\$0.00	

Once you are finished entering data for the requirement, press the **Update** button.

Requirements?

Edit Row	Cancel Edit							Update
10500	10500	10500	10500	10500	10500	x		
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total		
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

The requirement data will then populate the requirements table and the summary table as shown below.

**Requirements?**

<b>Edit Row</b>		<b>Cancel Edit</b>						
Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Add	
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total		
\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$63,000.00		

**Receipts?**

<b>Edit Row</b>		<b>Remove Row(s)</b>		<b>Cancel Edit</b>				
Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt	Add	
Description	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total	
No items to show.								

**Summary**

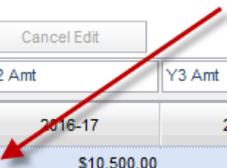
	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total
<b>Total Requirements</b>	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$63,000.00
<b>Total Receipts</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Appropriation</b>	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$63,000.00

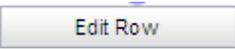
**Edit a Row**

To edit a row that has been entered, click on the row to highlight it.

**Requirements?**

<b>Edit Row</b>		<b>Cancel Edit</b>						
Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Add	
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total		
\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$63,000.00		



Click on the Edit Row button  and the data in the selected row will populate the Edit/Add row line at the top of the grid as show below. Note: You can also double click the row and it will populate the Edit/Add row line.

**Requirements** 

Edit Row		Cancel Edit							
10500	10500	10500	10500	10500	10500	10500			<b>Update</b>
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total			
\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$63,000.00			

Once you are finished making your edits, click the Update button.

**Requirements** 

Edit Row		Cancel Edit							
10500	10500	10500	10500	10500	99500	x			<b>Update</b>
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total			
\$99,500.00	\$99,500.00	\$99,500.00	\$99,500.00	\$99,500.00	\$99,500.00	\$597,000.00			

### Cancel an Edit

While editing, if you decide to cancel, press the Cancel Edit button.

**Requirements** 

Edit Row		Cancel Edit							
10500	10500	10500	10500	10500	10500	x			<b>Update</b>
2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total			
\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$99,500.00	\$152,000.00			

### RECEIPTS

The next section of the Request Detail tab is for Receipts. It has three buttons: Edit Row, Remove Row(s) and Cancel Edit. Both the Edit Row and Remove Row(s) buttons can only be utilized once rows have been created.

**Receipts** 

<b>Edit Row</b>	<b>Remove Row(s)</b>	<b>Cancel Edit</b>
-----------------	----------------------	--------------------

### Add Receipts

The data entry row highlighted below is used to add a row to the receipts table. Multiple receipts can be entered.

Receipts ⓘ

Edit Row Remove Row(s) Cancel Edit

Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Add
Description	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total	
No items to show.								

Click on each column of the row to enter a receipt dollar amount for each year of the 6-year capital planning period. When finished, click the Add button.

Receipts ⓘ

Edit Row Remove Row(s) Cancel Edit

Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Add
Description	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total	
No items to show.								

Once the Add button is clicked, the receipts data will be added to the receipts table, clearing the fields in the data entry grid for entry of another row. Add as many rows of receipts as appropriate to complete the Worksheet III form.

Receipts ⓘ

Edit Row Remove Row(s) Cancel Edit

Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Add
Description ^ 1	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total ^ 2	
	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$30,000.00	

receipts table

Notice the receipts data populates the summary table as shown below.

**Summary**

	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total
<b>Total Requirements</b>	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	\$99,500.00	\$152,000.00
<b>Total Receipts</b>	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$30,000.00
<b>Appropriation</b>	\$5,500.00	\$5,500.00	\$5,500.00	\$5,500.00	\$5,500.00	\$94,500.00	\$122,000.00

**Estimated Project Schedule**

Enter the key project dates related to the new construction by clicking on the calendar icon to select the appropriate dates. All four project schedule fields are mandatory.

Estimated Project Schedule (dates):

Begin Design :   **Begin Construction** :   **Completion** :   **Occupancy** :  

- **Begin Design** - Enter the date that design work is projected to begin or started if the project received advance planning.
- **Begin Construction** - Enter the date that construction is projected to begin.
- **Completion** - Enter the date that construction is projected to be complete.
- **Occupancy** - Enter the date that is projected for occupancy (leave blank if project does not involve occupancy).

**Impact to Operating Budget**

This question is mandatory and must be answered in order to submit the Worksheet III. When answered “Yes”, you must enter a description in the space provided as shown below:

Does the requested project impact the operating budget? :  Yes  No

If yes, describe:

☰ ☰ ☰ ☰ ☰ B / U

### Remove Row(s)

To delete a row that has been entered, click on a row to highlight it.

Receipts ?

Edit Row Remove Row(s) Cancel Edit

Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Add
Description ^ 1	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total ^ 2	
	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$30,000.00	

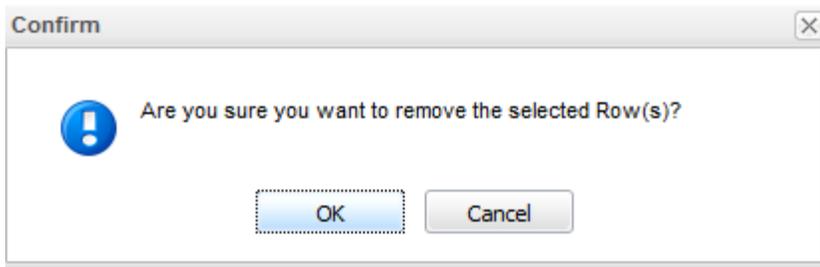
Click **Remove Row(s)** to delete the row you just selected.

Receipts ?

Edit Row **Remove Row(s)** Cancel Edit

Description	Y1 Amt	Y2 Amt	Y3 Amt	Y4 Amt	Y5 Amt	Y6 Amt		Add
Description ^ 1	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	Total ^ 2	
	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$30,000.00	

When the Remove Row(s) button is clicked, the follow window will appear. To cancel the deletion, click the Cancel button. To complete the deletion, click the OK button.



### Edit Row

Editing rows in the Receipts sections works in the same fashion as does the requirements section as shown on page 23 of this document.

## PROJECT CRITERIA TAB

### Project Criteria

This tab is used only for new capital projects. The questions presented in this section of the request are mandatory in order to submit the request to OSBM. Each question is pre-populated with a “No” answer. Once a “Yes” answer is indicated, additional mandatory data collection controls are presented.

- Health and Safety Considerations?  Yes  No
- Federal/State Mandate?  Yes  No
- Critical Timing?  Yes  No
- Strategic Alignment?  Yes  No
- Customer Service & Effectiveness?  Yes  No
- Operation Savings or Efficiencies?  Yes  No
- Fiscal Considerations?  Yes  No
- Environmental?  Yes  No
- Economic Development?  Yes  No
- Preservation of Existing Facilities?  Yes  No

- **Health and Safety Considerations?**

If the project corrects a deficiency documented by FCAP, select “Yes”. Answering “Yes” presents additional mandatory data collection controls as shown below. Remember, answering yes to this question and selecting 0, 1, or 2 will require you to attach an FCAP Report as indicated in the Named Attachments section on the Basic Information tab.

Health and Safety Considerations?  Yes  No

If the project corrects a deficiency documented by FCAP, enter the FCAP Correction Priority :  
Enter Description and Justification of Health and

0  
1  
2  
3-6

- Federal/State Mandate?**

If the project is required by Federal law, State statute, or court order, when is compliance mandated?

Federal/State Mandate?  Yes  No

If the project is required by Federal law, State statute, or court order, when is compliance mandated? :

Enter Description and Justification of Federal/State Mandate:

**B / U**

- Immediately; project achieves full compliance
- Project represents progress toward compliance
- Within next biennium; project achieves full compliance

- Critical Timing?**

For the first drop-down box of the critical timing question, please select the answer that best describes any prior State commitment to the project.

Critical Timing?  Yes  No

Please select the answer that best describes any prior State commitment to the project. :

If this project impacts the start or completion of another project, please select the best description of the critical timing issue. :

Enter Description and Justification of Critical Timing:

**B / U**

- Included in the Governors previous CIP
- New phase of a recently completed capital project
- No resources currently committed to project
- Received previous advance planning authorization
- Under construction; request is supplement or new phase

For the second drop-down box of the critical timing question, please select the best description of the critical timing issue.

Critical Timing?  Yes  No

Please select the answer that best describes any prior State commitment to the project. :

If this project impacts the start or completion of another project, please select the best description of the critical timing issue. :

Enter Description and Justification of Critical Timing:

**B / U**

- No project completion requirements
- Required to start another capital project in agency's Six Year Plan
- Required to start another capital project ranked in agency's top 3
- Requirement of another already started capital project

- **Strategic Alignment?**

Answer “Yes” to this question if the project aligns with your agency’s strategic mission, goals and objectives; and then answer the three questions highlighted below.

Strategic Alignment?  Yes  No

Is the project identified on your agency's Master Plan? :  Yes  No

Is the project identified on your agency's previous Six-Year CIP? :  Yes  No

Does the project advance your agency's mission, goals and objectives? :  Yes  No

Enter Description and Justification of How the Project Aligns with your Agency's Strategic Mission, Goals, and Objectives

☰ ☰ ☰ ☰ B / U

- **Customer Service & Effectiveness?**

Answering “Yes” to this question requires that you answer two questions identifying the degree to which the request improves program effectiveness. For the first drop-down box, answer whether or not the project corrects service deficiencies or provides documented growth in demand for services.

Customer Service & Effectiveness?  Yes  No

Does the project correct service deficiency or provide for documented growth in demand for services? :

To what degree does the project improve program effectiveness? :

Enter Description and Justification for Customer

☰ ☰ ☰ ☰ B / U

Corrects deficient services and provides capacity for current demand

Corrects deficient services and provides capacity for future demand

Project does not address the growth of a program

Provides for future demand even though services are currently adequate



For the second drop-down box, indicate the degree to which the project improves program effectiveness.

Customer Service & Effectiveness?  Yes  No

Does the project correct service deficiency or provide for documented growth in demand for services? :

To what degree does the project improve program effectiveness? :

Enter Description and Justification for Customer

☰ ☰ ☰ ☰ B / U

Improves program effectiveness

No impact on program effectiveness

Significantly improves program effectiveness



- Operating Savings or Efficiencies?**

Select the answer that best describes the extent to which the project lowers annual operating expenses.

Operation Savings or Efficiencies?  Yes  No

To what extent does the project lower annual operating expenses? :

Enter Description and Justification for operating

B / U

\$100,000 - \$300,000  
 Does not improve operational efficiency  
 Less than \$100,000  
 More than \$300,000

- Fiscal Considerations?**

Select the answer that best describes what portion of the total project cost is covered or matched by Non-General Funds.

Fiscal Considerations?  Yes  No

What portion of the total project cost is covered or matched by Non-General Funds? :

Enter Description and Justification for Fiscal Considerations

B / U

0%  
 25% - 75%  
 More than 75%  
 Up to 25%

- Environmental?**

Answering “Yes” to this question requires that you answer two questions pertaining to environmental factors. For the first drop-down box, select the answer that best describes the extent to which the project reduces energy usage and incorporates green features.

Environmental?  Yes  No

To what extent does the project reduce energy usage and incorporate green features? :

To what extent does the project remediate an existing environmental hazard? :

Enter Description and Justification for Environmental Factors

B / U

Project will be LEED certified  
 Project does not conserve energy  
 Reduces energy consumption up to 15%  
 Reduces energy consumption by 15%-30%  
 Reduces energy consumption by >30%

For the second drop-down box, select the answer that best describes the extent to which the project remediates an existing environmental hazard.

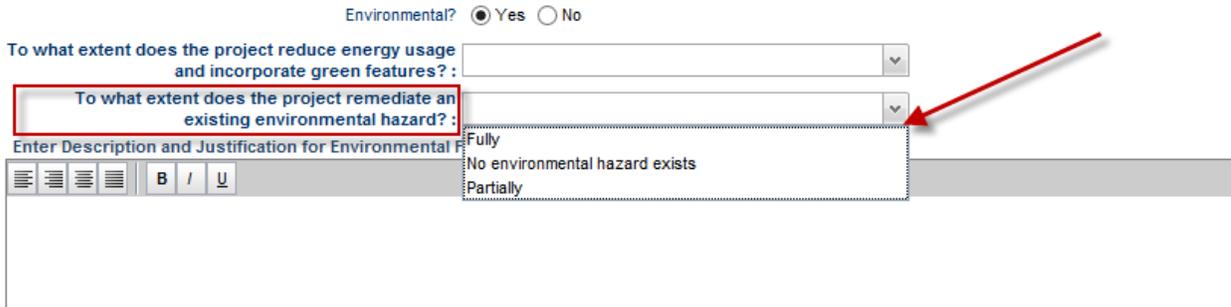
Environmental?  Yes  No

To what extent does the project reduce energy usage and incorporate green features? :

To what extent does the project remediate an existing environmental hazard? :

Enter Description and Justification for Environmental

Fully  
No environmental hazard exists  
Partially



- Economic Development?**

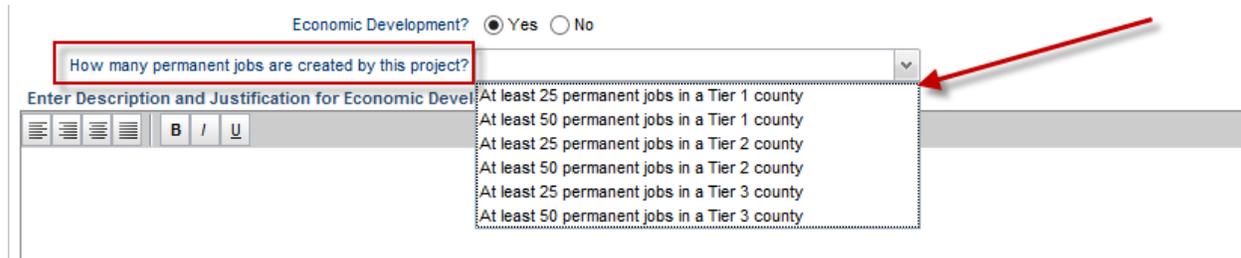
Select the answer that best describes the number of permanent jobs created by this project.

Economic Development?  Yes  No

How many permanent jobs are created by this project?

Enter Description and Justification for Economic Development

At least 25 permanent jobs in a Tier 1 county  
At least 50 permanent jobs in a Tier 1 county  
At least 25 permanent jobs in a Tier 2 county  
At least 50 permanent jobs in a Tier 2 county  
At least 25 permanent jobs in a Tier 3 county  
At least 50 permanent jobs in a Tier 3 county



- Preservation of Existing Facilities?**

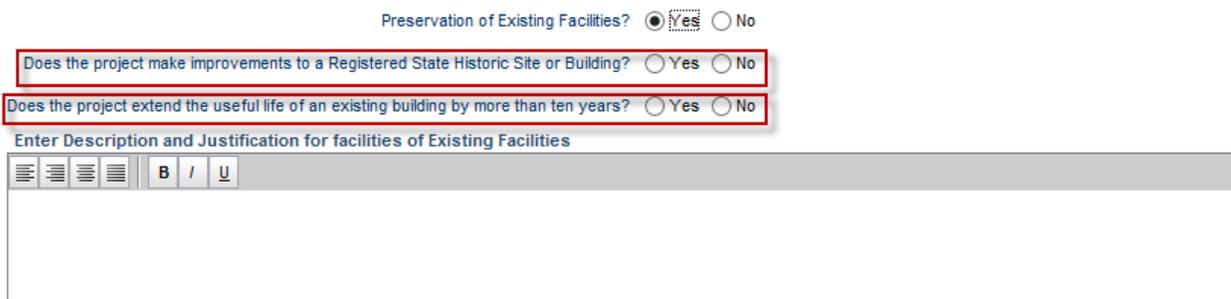
Answering “Yes” to the preservation of existing facilities question requires that you answer “Yes” or “No” to the two questions shown below.

Preservation of Existing Facilities?  Yes  No

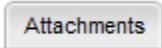
Does the project make improvements to a Registered State Historic Site or Building?  Yes  No

Does the project extend the useful life of an existing building by more than ten years?  Yes  No

Enter Description and Justification for facilities of Existing Facilities



## ATTACHMENTS TAB



The attachments section of the form provides the ability to attach any file to the request using the “Add Attachment” control. Files attached here may be viewed or deleted.

Status: BRU Draft

Basic Information Request Detail Project Criteria **Attachments**

**Attachments**

Add Attachment View Attachment Delete Attachment

Attachment Name	Attachment Type	Attachment Size	Date Uploaded	Uploaded By
No items to show.				

Attachments that have been added using a different section of the form (i.e., the OC-25 Cost Estimate, the FCAP Report, and the Land Acquisition Plan) will show in the list. However, you will not be able to delete those files here. To delete attachments added to the request in another part of the form, you will need to manage the attachment from the location in the form for which it was attached.

Basic Information Request Detail Project Criteria **Attachments**

**Attachments**

Add Attachment View Attachment Delete Attachment

Attachment Name	Attachment Type	Attachment Size	Date Uploaded	Uploaded By
Land Acquisition Plan for WSIII - Albermarle Bu...	application/vnd.openxmlformats-officedocume...	12.558 KB	09/10/2014	IBIS User1
FCAP Report.pdf	application/pdf	96.989 KB	09/10/2014	IBIS User1
OC-25_Cost_Estimate_MentalHealth_Albermarl...	application/vnd.openxmlformats-officedocume...	8.879 KB	09/10/2014	IBIS User1

## View an Attachment

To view an attachment, first click on the attachment name, and then click the “View Attachment” button.

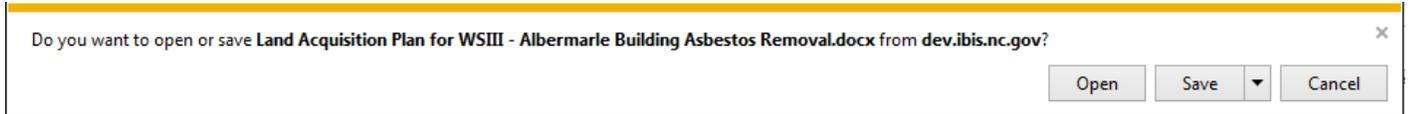
Basic Information Request Detail Project Criteria **Attachments**

**Attachments**

Add Attachment View Attachment Delete Attachment

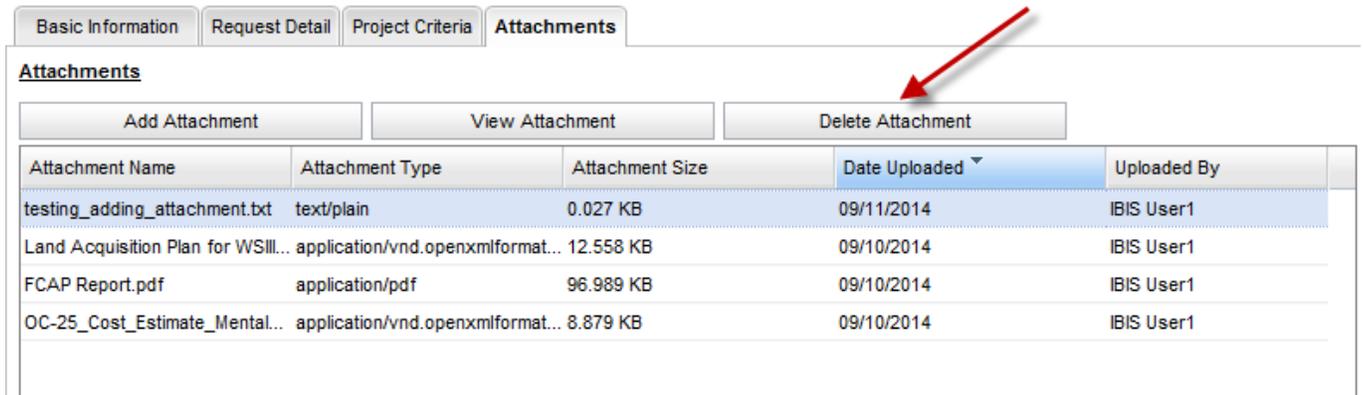
Attachment Name	Attachment Type	Attachment Size	Date Uploaded	Uploaded By
Land Acquisition Plan for WSIII - Albermarle Bu...	application/vnd.openxmlformats-officedocume...	12.558 KB	09/10/2014	IBIS User1
FCAP Report.pdf	application/pdf	96.989 KB	09/10/2014	IBIS User1
OC-25_Cost_Estimate_MentalHealth_Albermarl...	application/vnd.openxmlformats-officedocume...	8.879 KB	09/10/2014	IBIS User1

Once clicked, you will see a message asking if you want to open or save the attachment. Click Open to open and view the attachment; or click Save to save the attachment.



### Delete an Attachment

To delete an attachment, first click on the attachment name, and then click the “Delete Attachment” button. Remember, you will not be able to delete attachments that have been added to the request in another part of the form (i.e., the OC-25 Cost Estimate, the FCAP Report, and the Land Acquisition Plan) while on the Attachment tab. To delete those attachments, you will need to manage those attachments from the location in the form for which it was attached.



Once you click Delete Attachment, you will be presented with a confirm message as shown below. Click “OK” to delete the attachment or “Cancel” to cancel the deletion.

