Required for "Revised Project" — Letter "R" and date of revision
Required for "Revised Project" — Approved Plan FY0x - FY0y, FY0z Project Rank #
Required for "New Project" — Letter "N" and date

DEFERRED MAINTENANCE AND CAPITAL IMPROVEMENT PLAN
FY 2004 - 2008

BUREAU OF LAND MANAGEMENT
PROJECT DATA SHEET

Project Score/Ranking	
Planned Funding FY	
Funding Source	

Project Identification

Project Title:		
Project No.:	Unit/Facility Name:	
Region/Area/District:	Congressional District:	State:

Project Justification

Project Description:

Project Need/Benefit:

Revision Statement: (provided when submitting a revised Project Data Sheet)

Ranking Categories: Identify the percent of the project that is in the following categories of need.

___ % Critical Health or Safety Deferred Maintenance
___ % Critical Health or Safety Capital Improvement
___ % Critical Resource Protection Deferred Maintenance
___ % Critical Resource Protection Capital Improvement
___ % Critical Mission Deferred Maintenance
___ % Compliance & Other Deferred Maintenance
___ % Other Capital Improvement
Total Project Score:

Capital Asset Planning Exhibit 300 Analysis Required: YES: NO:

Does the project include elements for:
Accessibility: YES: NO: Security: YES: NO:
Seismic: YES: NO: Energy Efficiency/Conservation: YES: NO:

Is this project at a:
Fee Site: YES: NO:
High Hazard Dam: YES: NO:

Project Costs and Status

Project Cost Estimate (this request): $'s % Deferred Maintenance Work: $ _____ ____ Capital Improvement Work: $ _____ ____ Total: $ _____ 100	Project Funding History: Appropriated to Date: $_____ Requested in FY___ Budget: $_____ Planned Funding FY___: $_____ Future Funding to Complete Project: $_____ Total: $_____
Class of Estimate (circle one): **A B C D DM** Estimate Good Until (mm/yy): __/__	
Dates: Sch'd (qtr/yy) Construction Start/Award: __/__ Project Complete: __/__	Project Data Sheet Prepared/Last Updated: __/__/__ Unchanged Since Department approval: YES: NO: