

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP): COVER SHEET**

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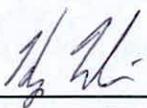
AGENCY NUMBER: H59 NAME: Technical College of the Lowcountry

OFFICE OF STATE BUDGET

**1. CPIP SUBMISSION AUTHORIZATION ON AVAILABILITY OF FUNDS**

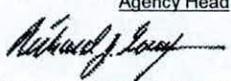
This submission presents this agency's Comprehensive Permanent Improvement Plan (CPIP) for fiscal years 2015-16, 2016-17, and for the following three fiscal years (2017-18, 2018-19, 2019-20). The plan includes all permanent improvements (as defined in the Budget and Control Board's Part I Manual and in Code Section 2-47-50) which are projected and proposed for those years by this agency as of the date this document is signed.

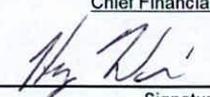
The submission of this Comprehensive Plan is authorized by the undersigned who certifies that the information presented is true and correct.

Signature   
 Typed Name Hayes Wisner  
 Title VP for Administrative Services  
 Date February 19, 2015

**2. CERTIFICATION THAT ALL FUNDS AVAILABLE HAVE BEEN APPLIED IN PLAN**

We certify that all funds available to this agency from its own sources or capabilities for financing permanent improvements have been applied to projects proposed in this Plan. For 2015-16, we certify that the funds projected for expenditure are, or with reasonable certainty will be, available to this agency.

Agency Head  
  
 Signature  
Richard Gough, President  
 Typed Name and Title

Chief Financial Officer  
  
 Signature  
Hayes Wisner, VP for Administrative Services  
 Typed Name and Title

**3. AGENCY CONTACT PERSON(S) ON THIS CPIP ARE:**

Name: Hayes Wisner Phone: 843-525-8333  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**2014 CPIP: TABLE OF CONTENTS**

This Comprehensive Plan includes the following documents arranged in the order indicated.

PART I	Page Numbers
1. Narrative Summary of the Five-Year Plan	<u>1</u>
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3. B&CB Form C2, Listing of Projects Proposed for 2015-16	<u>3</u>
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**PART II Supporting Documentation:**

- 10. \_\_\_\_\_
- 11. \_\_\_\_\_
- 12. \_\_\_\_\_
- 13. \_\_\_\_\_

**SUBMIT ORIGINAL (UNBOUND) TO:**

CAPITAL BUDGETING UNIT  
 EXECUTIVE BUDGET OFFICE  
 1205 PENDLETON STREET, SUITE 529  
 COLUMBIA, SOUTH CAROLINA 29201

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP): NARRATIVE SUMMARY OF THE FIVE-YEAR PLAN**

AGENCY NUMBER: H59      NAME: Technical College of the Lowcountry

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<p><b>1. What is the condition and adequacy of your existing facilities? Demand trends? What is the total amount of your agency's maintenance needs?</b></p> <p>TCL has 19 buildings for use for instructional or support purposes with only four constructed after 1977. The other buildings date to the mid-1970's or earlier and only six of these have received significant renovations during the last 30 years. Three buildings require major renovations, exceeding the scope of routine maintenance.</p> <p>Overall demand on facilities is currently stable, but there is significant pressure for growth on the New River campus building. As demand in that portion of the College's service area builds, we see a need for a second building on that campus.</p>	<p><b>2. What is your approach to maintaining existing facilities in acceptable condition? How are maintenance needs addressed? If your agency has an account dedicated to maintenance needs, is the name of that account and what is its uncommitted balance?</b></p> <p>The College's planning process includes emphasis on both short and long range facilities issues. The Colleges' Facilities staff addresses general repairs and maintenance needs through the annual physical plant budget. More significant maintenance needs are addressed using funds generated through the Capital Fee portion of tuition.</p>
<p><b>3. What are your facility replacement and addition needs?</b></p> <p>Renovation:    Building 8 (interior)                   Buildings 15 &amp; 16 (interior and exterior)</p> <p>Addition:     Technology Building - New River Campus</p>	<p><b>4. What is the theme of your five-year CPIP? How does it address these questions?</b></p> <p>Technical College of the Lowcountry facility needs are driven by two components: the development of the New River campus to provide space for programs needed to support the growth of that campus, and the need to maintain and improve existing facilities supporting current programs and students. The College applies resources to projects in accordance with the priorities of the TCL Facilities Master Plan.</p>

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP): FINANCIAL SUMMARY OF THE FIVE-YEAR PLAN**

AGENCY NUMBER: H59      NAME: Technical College of the Lowcountry

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(1)	(2) Plan Year 1 2015-16	(3) Plan Year 2 2016-17	(4) Plan Year 3 2017-18	(5) Plan Year 4 2018-19	(6) Plan Year 5 2019-20	(7) Grand Total Years 1-5
<b>1. NUMBER OF PROPOSED PROJECTS</b> (from Forms C2)	1.00	1.00	0.00	1.00	0.00	3
<b>2. ESTIMATED COSTS AND PROPOSED FUND SOURCES</b>	975,000.00	2,300,000.00	0.00	12,500,000.00	0.00	
0 Capital Improvement Bonds						
1 Departmental CIB						
2 Institution (Tuition) Bonds						
3 Revenue Bonds						
4 Excess Debt Service						
5 Capital Reserve Fund						
6 Appropriated State	975,000.00	2,300,000.00	0.00	12,500,000.00	0.00	15,775,000.00
7 Federal						
8 Athletic						
9 Other						
<b>TOTAL</b>	975,000.00	2,300,000.00		12,500,000.00		15,775,000.00

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

AGENCY NUMBER:     H59     NAME:     Technical College of the Lowcountry    

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PROJECT PROPOSED FOR PLAN YEAR (Check One):

1: 2015-16 <input checked="" type="checkbox"/>	2: 2016-17 <input type="checkbox"/>	3: 2017-18 <input type="checkbox"/>	4: 2018-19 <input type="checkbox"/>	5: 2019-20 <input type="checkbox"/>
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PRIORITY NUMBER	PROJECT NAME	ESTIMATED COST	PROPOSED SOURCE(S) OF FUNDS
1	Building 16 Renovations	975,000.00	Appropriated in State FY15 budget
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
<b>TOTAL</b>		975,000.00	

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

Agency Number: H59 Name: Technical College of the Lowcountry

PROJECT PROPOSED FOR PLAN YEAR (Check One): 1: 2015-16 x 2: 2016-17

1. Project Name: Building 16 Renovation

3. Project Type: Renovation 100

2. Project Priority: 1 of 1 in Plan Year

4. Facility Type: Classroom/Lab 100

**5. What is the project?**

Renovate envelope of Building 16 on Beaufort campus of TCL. Remove deteriorated CorTen shell, replacing with new exterior walls. Remove and replace roof. Replace dilapidated roll-up bay doors. Upgrade interior lighting to LED. Paint interior and replace floor finishes.

**975000**

Attach Form C4 for additional annual operating costs or savings for each proposed new project.

**8. Total estimated project cost:**

1.	Land Purchase	Land	<u>                    </u> Acres
2.	Building Purchase	Floor Space:	<u>                    </u> Gross Square Fe
3.	<u>100,000.00</u> Professional Services Fees		
4.	Equipment and/or Materials	Information Technology	\$ <u>                    </u>
5.	<u>20,000.00</u> Site Development		
6.	New Construction	Floor Space:	<u>                    </u> Gross Square Fe
7.	<u>200,000.00</u> Renovations - Building Interior	Floor Space:	<u>17,700</u> Gross Square Fe
8.	Renovations - Utilities		
9.	<u>90,000.00</u> Roofing <u>                    </u> 30 Roof Age		
10.	<u>450,000.00</u> Renovations - Building Exterior		
11.	Other Permanent Improvements		
12.	<u>17,500.00</u> Landscaping		
13.	Builders Risk Insurance		
14.	Other Capital Outlay		
15.	Labor Costs		
16.	Bond Issue Costs		
17.	Other		
18.	<u>97,500.00</u> Contingency		
	<b>\$ <u>975,000.00</u> TOTAL PROJECT BUDGET</b>		

**6. Why is the project needed?**

Building exterior and roof are significantly deteriorated. This project has already been funded by appropriation in the FY14-15 budget.

**7. What alternatives to this project were considered?**

Demolition and construction of a new, larger, improved facility was considered. Insufficient funding was available for that higher cost alternative.

**9. Proposed Source of Funds**

0.	Capital Improvement Bonds	
1.	Departmental CIB	
2.	Institution (Tuition) Bonds	
3.	Revenue Bonds	
4.	Excess Debt Service* ( )	
5.	Capital Reserve Fund	
6.	<u>975,000.00</u> Appropriated State	\$ <u>100,000.00</u>
7.	Federal	(2) After 2015-2016 Year
8.	Athletic	\$ <u>875,000.00</u>
9.	Other* ( )	(3) Total Project Cost
	<b>\$ <u>975,000.00</u> TOTAL</b>	<b>\$ <u>975,000.00</u></b>

**10. Project Schedule  
(for 2015-16 only)**

A. Estimated Start Date:	<u>June 1, 2015</u>
B. Estimated Completion Date:	<u>December 31, 2015</u>
C. Estimated Total Expenditure	
(1) In 2015-2016 Year	<u>100,000.00</u>
(2) After 2015-2016 Year	<u>875,000.00</u>
(3) Total Project Cost	<u>975,000.00</u>

\* Specify Type

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

**ADDITIONAL ANNUAL OPERATING COSTS/SAVINGS  
RESULTING FROM PERMANENT IMPROVEMENT PROJECT**

1. AGENCY  
Code      H59 Name Technical College of the Lowcountry

2. PROJECT  
No.      Name Building 16 Renovations

PROJECT PROPOSED FOR PLAN YEAR (Check One):  1: 2015-16   x    2: 2016-17     

3. ADDITIONAL ANNUAL OPERATING COSTS/SAVINGS.  
(Check whether reporting cost or savings.)  
 COSTS     SAVINGS     NO CHANGE

4.

TOTAL ADDITIONAL OPERATING COSTS/SAVINGS Projected Financing Sources				
(1)	(2)	(3)	(4)	(5)
Fiscal Year	General Funds	Federal	Other	Total
1) 2016			\$1,000.00	\$ 1,000.00
2) 2017			\$1,000.00	\$ 1,000.00
3) 2018			\$1,000.00	\$ 1,000.00

5. If "Other" sources are reported in Column 4 above, itemize and specify what the other sources are (revenue, fees, etc.).

6. Will the additional costs be absorbed into your existing budget? If no, how w funds be provided?     YES     NO

7. Itemize below the cost factors that contribute to the total costs or savings rep Column 5 for the first fiscal year.

<u>COST FACTORS</u>	<u>AMOUNT</u>
1. HVAC savings due to improved building	<u>1,000.00</u>
2. envelope/LED lights	<u>                    </u>
3.	<u>                    </u>
4.	<u>                    </u>
5.	<u>                    </u>
6.	<u>                    </u>
7.	<u>                    </u>
8.	<u>                    </u>
TOTAL	<u>1,000.00</u>

8. If personal services costs or savings are reported in 7 above, please indicate additional positions required or positions saved.                     

9. Submitted By:  
  
\_\_\_\_\_  
Signature of Authorized Official and Title

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

AGENCY NUMBER:     H59     NAME:     Technical College of the Lowcountry    

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PROJECT PROPOSED FOR PLAN YEAR (Check One):

1: 2015-16 <input type="checkbox"/>	2: 2016-17 <input checked="" type="checkbox"/>	3: 2017-18 <input type="checkbox"/>	4: 2018-19 <input type="checkbox"/>	5: 2019-20 <input type="checkbox"/>
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PRIORITY NUMBER	PROJECT NAME	ESTIMATED COST	PROPOSED SOURCE(S) OF FUNDS
1	Renovation of Building 8	2,300,000.00	Appropriated state
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
	<b>TOTAL</b>	2,300,000.00	

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

Agency Number: H59 Name: Technical College of the Lowcountry

PROJECT PROPOSED FOR PLAN YEAR (Check One): 1: 2015-16 \_\_\_ 2: 2016-17 \_\_\_x

1. Project Name: Renovation of Bldg 8

3. Project Type: Renovation 100

2. Project Priority: 1 of 1 in Plan Year

4. Facility Type: Administration 100

**5. What is the project?**

This project consists of the renovations of Building 8 (Moor Hall) on the college's Beaufort campus. A complete interior retrofit of the building is needed, including the addition of an elevator, to make the building suitable for use as classrooms and administrative offices and bring the building into compliance with ADA standards.

**The total projected cost of this project is \$ 2,300,000.**

Attach Form C4 for additional annual operating costs or savings for each proposed new project.

**8. Total estimated project cost:**

1. _____	Land Purchase	Land	_____	Acres
2. _____	Building Purchase	Floor Space:	_____	Gross Square Fe
3. <u>200,000.00</u>	Professional Services Fees			
4. _____	Equipment and/or Materials	Information Technology	\$ _____	
5. <u>183,250.00</u>	Site Development			
6. _____	New Construction	Floor Space:	_____	Gross Square Fe
7. <u>1,323,645.00</u>	Renovations - Building Interior	Floor Space:	<u>8,816</u>	Gross Square Fe
8. _____	Renovations - Utilities			
9. _____	Roofing _____	Roof Age		
10. <u>132,950.00</u>	Renovations - Building Exterior			
11. _____	Other Permanent Improvements			
12. _____	Landscaping			
13. _____	Builders Risk Insurance			
14. _____	Other Capital Outlay			
15. _____	Labor Costs			
16. _____	Bond Issue Costs			
17. <u>147,450.00</u>	Other			
18. <u>312,705.00</u>	Contingency			
	<b>\$ <u>2,300,000.00</u> TOTAL PROJECT BUDGET</b>			

**6. Why is the project needed?**

Building 8 is approximately 75 years old, vacant, historically significant, and will require extensive renovations. The two story structure must be modernized to comply with safety and ADA standards. The exterior of the building is sound. This building is the most visible remnant of the Mather School, which dates to 1868.

**7. What alternatives to this project were considered?**

In its current state, the building cannot be occupied. The only alternative to renovation is demolition. Due to the historical significance of the building to the community and the potential value to the College, renovation should be pursued.

**9. Proposed Source of Funds**

0. _____	Capital Improvement Bonds		
1. _____	Departmental CIB		
2. _____	Institution (Tuition) Bonds		
3. _____	Revenue Bonds		
4. _____	Excess Debt Service* ( _____ )		
5. _____	Capital Reserve Fund		
6. <u>2,300,000.00</u>	Appropriated State	\$ _____	
7. _____	Federal	_____	
8. _____	Athletic	\$ _____	
9. _____	Other* ( _____ )	_____	
	<b>\$ <u>2,300,000.00</u> TOTAL</b>	\$ _____	

\* Specify Type

**10. Project Schedule  
(for 2015-16 only)**

A. Estimated Start Date:	_____
B. Estimated Completion Date:	_____
C. Estimated Total Expenditure	_____
(1) In 2015-2016 Year	_____
(2) After 2015-2016 Year	_____
(3) Total Project Cost	_____
	\$ _____

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

**ADDITIONAL ANNUAL OPERATING COSTS/SAVINGS  
RESULTING FROM PERMANENT IMPROVEMENT PROJECT**

1. AGENCY  
Code H59 Name Technical College of the Lowcountry

2. PROJECT  
No. \_\_\_\_\_ Name Building 8 R

PROJECT PROPOSED FOR PLAN YEAR (Check One):  1: 2015-16 \_\_\_  2: 2016-17 \_\_x\_\_

3. ADDITIONAL ANNUAL OPERATING COSTS/SAVINGS.  
(Check whether reporting cost or savings.)  
 COSTS  SAVINGS  NO CHANGE

4.

TOTAL ADDITIONAL OPERATING COSTS/SAVINGS Projected Financing Sources				
(1)	(2)	(3)	(4)	(5)
Fiscal Year	General Funds	Federal	Other	Total
1)			\$8,000.00	\$ 8,000.00
2)			\$8,000.00	\$ 8,000.00
3)			\$8,000.00	\$ 8,000.00

5. If "Other" sources are reported in Column 4 above, itemize and specify what the other sources are (revenue, fees, etc.).

Additional operating costs will be funded with local tuition revenue. No tuition increases will be needed to fund this increased cost.

6. Will the additional costs be absorbed into your existing budget? If no, how w funds be provided?  YES  NO

7. Itemize below the cost factors that contribute to the total costs or savings rep Column 5 for the first fiscal year.

<u>COST FACTORS</u>	<u>AMOUNT</u>
1. <u>Utilities as bldg is returned to service</u>	<u>8,000.00</u>
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
TOTAL	<u>8,000.00</u>

8. If personal services costs or savings are reported in 7 above, please indicate additional positions required or positions saved. \_\_\_\_\_

9. Submitted By:  
\_\_\_\_\_  
Signature of Authorized Official and Title

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

AGENCY NUMBER:     H59     NAME:     Technical College of the Lowcountry    

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PROJECT PROPOSED FOR PLAN YEAR (Check One):

1: 2015-16 <input type="checkbox"/>	2: 2016-17 <input type="checkbox"/>	3: 2017-18 <input checked="" type="checkbox"/>	4: 2018-19 <input type="checkbox"/>	5: 2019-20 <input type="checkbox"/>
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PRIORITY NUMBER	PROJECT NAME	ESTIMATED COST	PROPOSED SOURCE(S) OF FUNDS
1	none		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
	<b>TOTAL</b>		

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

AGENCY NUMBER:     H59     NAME:     Technical College of the Lowcountry    

PROJECT PROPOSED FOR PLAN YEAR (Check One):

1: 2015-16 <input type="checkbox"/>	2: 2016-17 <input type="checkbox"/>	3: 2017-18 <input type="checkbox"/>	4: 2018-19 <input checked="" type="checkbox"/>	5: 2019-20 <input type="checkbox"/>
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PRIORITY NUMBER	PROJECT NAME	ESTIMATED COST	PROPOSED SOURCE(S) OF FUNDS
1	New Technology Building - New River Campus	12,500,000.00	Appropriated state
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
<b>TOTAL</b>		12,500,000.00	

**2015 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN (CPIP)**

AGENCY NUMBER:     H59     NAME:     Technical College of the Lowcountry    

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PROJECT PROPOSED FOR PLAN YEAR (Check One):

1: 2015-16 <input type="checkbox"/>	2: 2016-17 <input type="checkbox"/>	3: 2017-18 <input type="checkbox"/>	4: 2018-19 <input type="checkbox"/>	5: 2019-20 <input checked="" type="checkbox"/>
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PRIORITY NUMBER	PROJECT NAME	ESTIMATED COST	PROPOSED SOURCE(S) OF FUNDS
1	none		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
	<b>TOTAL</b>		