

COUNTY FACILITIES PLANNING WORK INITIATION REQUEST FORM

Please complete a form for each new proposal review request.

Work Proposal Name:		Date of Request:		
Requesting Department:		Department Contact Name:		
High Org:	Low Org:	Approval Signature of Department Head:		
DESCRIPTION				
Please provide a detailed description of the request:				
How will this proposal impro and the County?	ove your operations, enhance cu	ustomer service or otherwise benefit your department		
How does this proposal align with the County's objectives on racial equity? Please see the County's Vision/Mission/Values and strategic focus areas attached				
Desired Timeline:		Anticipated Funding Source (check all that apply and		
Begin Date:		include amount allocated under each category):		
End Date:		Operating Budget:		
Duration:		Capital Budget: Other (i.e. grants, donations, etc.; please describe):		
Request Involves:		Cition (i.e. grants, donadoris, etc., piease describe).		

BHD Property

Parks Property

The Basics

Vision

By achieving racial equity, Milwaukee is the healthiest County in Wisconsin



Mission

We enhance quality of life through great public service

Values

Inclusion

Influence

Integrity

Seek diverse perspectives

Use your power for good

Do the right thing

Strategic Focus Areas

1. Create Intentional Inclusion

1A: Reflect the full diversity of the County at every level of County government

1B: Create and nurture an inclusive culture across the County government

1C: Increase the number of County contracts awarded to minority and women-owned businesses

2. Bridge the Gap

2A: Determine what, where and how we deliver services based on the resolution of health disparities

2B: Break down silos across County government to maximize access to and quality of services offered

2C: Apply a racial equity lens to all decisions

3. Invest in Equity

3A: Invest "upstream" to address root causes of health disparities

3B: Enhance the County's fiscal health and sustainability

3C: Dismantle barriers to diverse and inclusive communities





COUNTY FACILITIES PLANNING WORK INITIATION REQUEST DETERMINATION

CFPSC Project Tracking #:		
TYPE OF REQUEST (Refer to paragra	aph 4.3 of the CFPSC charter for more det	ails)
1. Asset Management	2. Move Management	3. Facility Improvements
4. New Footprint	5. Contractural Obligations	6. Centralized Facilities Management Process Improvement
CFPSC Review Comments:		
		FOR EASEMENTS ONLY Reviewed & Recommended for Approval:
		DAS — FM, AE&ES (Legal Description)
		Director, DAS
		Corporation Counsel
		Note: 1. Easements affecting lands zoned "Parks" require County Board approval. 2. Forward a copy of the recorded easement to AE&ES.
	ng Committee reviewed this proposal on ty Facilities Planning Steering Committee	. As evidenced by the approval of