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| --- | --- | --- | --- |
| Project Name: |  | Submission Date: |  |
| Requesting Department: |  | Requestor Signature:  |  |
| Project Location: |  |
| Estimated Start Date: |  | Estimated Completion Date: |  |
| Project Description:  |  |
|  |
|  |
| **Structural Repairs and Renovations – Physical Plant** |
| Proposed Source of Funding: |  | Signature:  |  |
| * In-House Project Cost
 | $ |
| * IT (voice Data wall receptacles)
 | $ |
| * IT Building Wiring
 | $ |
| * Contracted Cost
 | $ |
| * Landscaping, Cement Work
 | $ |
| * Fire & Alarm System Cost
 | $ |
| * Fire Sprinkler System
 | $ |
| * Powel DDC Services
 | $ |
| * Engineering Services
 | $ |
| * Asbestos Abatement
 | $ |
| * Contingency
 | $ |
| *Structural Total Cost Estimate:* | *$* |
| **Furnishings and Audio Visual – Requesting Department** |
| Proposed Source of Funding:  |  | Signature: |  |
| * Furniture
 | $ |
| * Modular Office Partitions
 | $ |
| * Work Stations
 | $ |
| * Computers
 | $ |
| * Audio Visual Equipment
 | $ |
| * Window Treatments
 | $ |
| * New Phone Equipment
 | $ |
| * Miscellaneous
 | $ |
| *Furnishing Total Cost Estimate:* | $ |
| **Total Cost Estimate:**  | $ |

Is this a multiphase project? Choose an item.

If yes, please provide project cost estimate for subsequent phases.

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| **Approvals** | **Signature** |  | **Date** |
|  |  |  |  |
| Director, Physical Plant: |  |  |  |
| Dean/Director: |  |  |  |
| Provost: |  |  |  |
| Senior V.P. for Operations: |  |  |  |