

Facility Services Project Request Form

Please complete items 1 through 11 and submit the form by clicking the submit button below. Or, forward the completed form to the Work Control Center, Maintenance and Materiel Building or Fax to Work Control Center at 715-346-2447.

Instructions:

- A. Complete Items 1 through 11.
- B. Special Requirements (under Item 1): Use this space to identify any special project requirements (e.g. temperatures to be maintained at other than comfort values, humidity limitations, lighting levels, particular floor or wall finishes required etc.).
- C. Objective of Request (Item 2): Use this space to identify what objective is expected to be met as a result of this project (e.g. conversion of an existing conference room into two private offices, provide a water cooling system for laboratory equipment, etc.).
- D. Desired Construction Completion Date (Item 8): A date should be provided for this request, unless the request is not for construction activity. Facility Services will assign a default date if a construction completion date is not provided. "ASAP" is not considered a valid completion date. If construction activity is not included in the request, write "N/A" in the space provided for the date. If a date is provided, identify in the space provided events or criteria that are dependent on this date (e.g. work must be completed before class begins in the fall semester, availability of funding expires with current fiscal year, space assigned to new personnel who will start on January 1, 2015, etc.)
- E. Funding (Item 5): Use these spaces to identify funding source, customer estimate of project cost, and funding comments such as expiration date if applicable, not-to-exceed amount if applicable, etc. Estimates for Campus delegated projects cannot exceed \$30,000 (including equipment and contingency) without additional approval.

1. WORK LOCATION

Campus: Building #: Building Name: Room No. (s): Primary Use:*

*Identify any special requirement that must be incorporated into or accommodated by this project.

Account Number to be billed:

****No work can proceed without an account number.****

2. DESCRIPTION OR SCOPE OF PROPOSED PROJECT:

3. Project Contact: Department Address: E-mail Address: Phone Number:

4. Financial Responsibility:

Department Address: E-mail Address: Phone Number:

5. Customer Estimate: Funding Comments:

6. Copy To: Department Address: Phone Number:

Copy To: Department Address: Phone Number:

7. Facility Available for Construction:

From:

To:

8. Desired Completion Date:

9. Comments:

10. Additional Information (Please check all known requirements)

ARCHITECTURAL	FINISHES	SPECIALTIES	FURNISHINGS
Walls/Partitions	Plastering	White/Tack Boards	Window Treatments
Masonry/Concrete	Drywall	Chalkboards	Fixed/Movable Seating
Windows	Wall Covering	Toilet/Shower	Modular Office Furniture
Doors/Hardware	Painting	Storage Shelving	Laboratory Furniture
Waterproofing	Vinyl Tile/Base	Access Flooring	Display Case
Insulating	Carpet/Base	Directories/Signs	Bookcase Shelving
Roofing/Gutters	Suspended Ceiling	Other	Custom Woodwork
Other	Other		Other

MECHANICAL	ELECTRICAL	PLUMBING	OTHER SERVICES
Window A/C	Lighting Fixtures	Domestic Water	Move/Rearrange
Central A/C	Receptacles/GFI	Distilled Water	Special Event
Temp/Humid Controls	Telecom Outlets	Air, Gas, Vacuum	Landscaping
Ductwork	Power if not 120V	Sink/Fixtures	Fencing
Diffusers/Grilles	Dedicated Circuits	Toilet/Fixtures	Rekey Door Hardware
Exhaust Fan	Fire Alarm	Drain/Vent	Asbestos Removal
Fume Hood	Emergency	Fire Sprinkler	Demolition
Other	Lighting	Other	Custodial
	Other		

11. Desired Action to be Taken: (Select ONE of the following):

Quotation / Estimate

Construction (Requires payment in full/Confirming Quotation will be issued after estimate is complete)

I authorize this expenditure and sufficient funds will exist for this expenditure and it complies with University fiscal policies.

Budget Approval Signature: _____

Customer Standing Order Number: _____

Project Manager Assigned: _____

You will have the opportunity to attach a file when you click the submit button

*Identify any special requirements - from page 1

DESCRIPTION OR SCOPE OF PROPOSED PROJECT - from page 1

Comments: - from page 2