

**Pacific University
Project/Construction Request Form**

Requester Please Fill Out This Section:

____Renovation/Alteration ____New Construction ____ In House (Facilities) ____Contracted ____Other

Change Order # _____

Date: _____ Desired Date of Completion: _____

Building: _____ Room # or Location: _____

Contact Name(s) _____ Ext. # _____

Please attach drawing or detailed explanation of what needs to be done: (Ex. carpet, paint build wall).

Facilities Review:

Project Estimate: \$ _____ Projected Start date: _____ Completion date: _____

UIS Review/Estimate: if Needed \$ _____ Start Date _____ Completion Date _____

Please attach drawing or detailed of bids for Estimate:

Project Acceptance:

Requester: _____ Budget: _____
Signature Date Signature Date

Account #: _____ Amount: \$ _____

Additional Budget: _____
Signature Date

Account # : _____ Amount: \$ _____

Mandatory Departments Notified Please Initial:

Facilities Management _____ Health and Safety _____ Business Office _____ Budget Office _____

New Buildings purchased or leased the office of VP for Finance contacted to add insurance _____

Facilities and Business Office Use Only:

WO#: _____

Project Number: _____

Project Name: _____

Project Coordinator / Manager: _____

Contractor Name: _____ \$ PO: _____ Phone: _____

Contractor Name: _____ \$ PO: _____ Phone: _____

Contractor Name: _____ \$ PO: _____ Phone: _____

Is a Permit required? City: _____ County: _____ Permit Numbers: _____

Completed Copies To The Following:

Original to Contact Person _____ Facilities Management _____ Facilities Engineering _____ HR _____

Manager/ Dean of Requesting Department _____ Property & Auxillary Services _____ UIS _____ CPS _____

Scheduling Coordinator _____ Accounts Payable _____ Budget Office _____ Purchasing _____

Conference & Events _____ Custodial _____