

Project Request

Campus	Department Information	Funding / Authorization
☐ Charlotte	Department:	Fund Source:
☐ Lee	Requested By:	Dean Signature
☐ Hendry /	Phone Number:	
Glades	Date:	Vice President or Campus President Signature
Project Information		
Location of Work:		Room Number(s):
	OFFICE	
		E USE ONLY
Project Type:	Department Information	mation
☐ Remodeling ☐ Renovation ☐ New Construction ☐ Negotiable (\$15,000 ☐ 3 Quotes (\$15,000 ☐ Bids Required (> ☐ State Contract ☐ Date Received:	00 Max) 0 - \$25,000) Survey Recomme	Project Number: ended: No Yes Number(s): ns:

Submit Request to the Campus President for approval. When <u>APPROVED</u>, transmit signed copy to Director of Facilities Planning & Management and Campus Plant Operations Supervisor.

Retain a copy for your files