

DESIGN & CONSTRUCTION

PROJECT REQUEST FORM

Requesting Agency: _____

Agency Point of Contact: _____

Email: _____ Phone #: _____

Project Location: _____

Desired Completion Date: _____

Defined Scope of Work: (What would you like to do?)

DESIGN & CONSTRUCTION

SCOPE APPROVAL FORM

Assigned Project Manager: _____

Scheduled Meeting Date: _____

Defined Scope of Work: (What does the client want to do?)

Drawing: Attached

Estimated Cost: \$ _____

Inside: Outside: If outside, provider of service: _____

Approval of Schedule and/or Scope:

Agency Point of Contact

Date: _____

SBD Project Manager

Date: _____

DESIGN & CONSTRUCTION

CLOSE-OUT FORM

Project Schedule Date: _____ Walk-Thru Completion Date: _____

Agency Point of Contact Date: _____

Project Manager Date: _____

Attachments:

Request: _____ Estimate/Sign-off/Punch List: _____ Drawing/Change Orders: _____