**Montana Technological University**

**Project Consideration Information** 

**Fiscal Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Proposed Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The purpose of this project information form is to determine the potential impact of physical facilities, utility systems, code implications, etc. to evaluate the feasibility of potential projects and to render an opinion of probable costs. For more complex projects, it may be necessary to engage contractors or design professionals to accomplish this. If this is needed, the requesting department shall be responsible for all costs incurred during the assessment phase, as well as design and construction costs.

**Project Information:**

Requestor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dept: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean / Dept. Head (Signature Required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building or Exterior Space: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Room Number of Space: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funds Available ($): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Request Funds Consideration (circle one):** Yes or No

Project Estimate or Proposal Cost ($): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Type (circle one): New Equipment Space Remodeling Exterior Site Work

Detailed Project Description: (provide as much information as possible, including information on potential equipment / utility loads and needs, change in occupancy load, etc. Attach additional pages if necessary.)

Check all that apply:

 \_\_\_\_\_ Change in egress, interior circulation or path of travel

 \_\_\_\_\_ Increase in occupancy or change in usage classification

 \_\_\_\_\_ Increase in electrical loads or addition or change in outlets

 \_\_\_\_\_ Change in fire alarm or fire suppression systems

 \_\_\_\_\_ Addition or change in telephone or data outlets

 \_\_\_\_\_ Change in building HVAC systems or change in load

 \_\_\_\_\_ Change in locks, keys, or door hardware

 \_\_\_\_\_ Change in building plumbing systems

 \_\_\_\_\_ Change in exterior site work

 \_\_\_\_\_ Change in hours of operation (potential operating cost impact)

 \_\_\_\_\_ Other significant impact (explain)

After this form is completed and approved by Director, Dean or Department Head, it should be sent to the Director of Physical Facilities by campus email – lsessions@mtech.edu. The Director will review this request with the Vice Chancellor of Finance and Administration for prioritization with all other campus project requests. Deadline to submit this form each calendar year is March 31st. If you need project costing assistance from facilities, this form should be submitted by January 31st each year.