

USF FACILITIES MANAGEMENT SPACE IMPACT REQUEST

EMAIL COMPLETED FORM TO: FM-ServiceCenter@usf.edu FOR INFORMATION CALL: [813-974-2750](tel:813-974-2750)

A REQUESTOR: CHECK IF REQUESTOR IS PROJECT CONTACT.

COLLEGE/UNIT: _____

REQUEST DATE: _____

NAME: _____

EMAIL: _____

PHONE: _____

PROJECT CONTACT:

Name: _____

Email: _____

Phone: _____

RESERVED FOR SIR MANAGER USE:

SIR NUMBER: _____

DATE: _____

B REQUEST: CHECK IF ADDITIONAL INFORMATION IS ATTACHED (SKETCHES, PHOTOS, PRODUCT INFO, ETC.)

Yes **No** SPACE IMPACT QUESTIONNAIRE: CHECK YES OR NO FOR ALL QUESTIONS.

WILL THIS PROJECT REQUIRE BUILDING OR REMOVING WALLS?

WILL OCCUPANTS BE DISPLACED WHILE WORK OCCURS?

IS AN ESTIMATE BEING REQUESTED FOR BUDGETING PURPOSES?

EXPECTED BUDGET RANGE:

<\$5,000

\$5,000 -- \$25,000

\$25,000 -- \$100,000

>\$100,000

BUILDING NAME: (IF NOT IN BUILDING, PLEASE ATTACH A MAP) _____

AREA IMPACTED: _____

DESCRIPTION OF MODIFICATION REQUESTED: _____

WILL ROOM Use/CLASSIFICATION CHANGE? Yes No

IN WHAT WAY IS YOUR CURRENT SPACE INADEQUATE FOR THE IDENTIFIED NEED? ADDRESS THE IMPLICATIONS TO YOUR PROGRAM/SERVICE IF YOUR REQUEST IS NOT APPROVED.

ANY CRITICAL FACTORS TO BE CONSIDERED IN SCHEDULING THIS PROJECT?

C CHARTFIELD(S): IF REQUEST IS APPROVED, IS SUFFICIENT FUNDING IN PLACE TO COVER THE PROJECT COST? IF YES, IDENTIFY FUNDING SOURCE.

OP. UNIT	FUND CODE	ACCOUNT	DEPT.	PRODUCT	INITIATIVE	BUD. REF.

ACCOUNTABLE OFFICER: _____

NAME: _____

EMAIL: _____

PHONE: _____

D SIGNATURE: SIGNATURE BELOW IS REQUIRED PRIOR TO REVIEW AND DOES NOT IMPLY APPROVAL OF THIS REQUEST.

REQUEST CATEGORY: CHECK ONE OF TWO CATEGORIES

ROUTINE: ROUTINE MODIFICATION REQUIRE SIGNATURE FROM DEAN OR APPROVED DESIGNEE OF THE DEPARTMENT. EXAMPLES OF ROUTINE MODIFICATIONS INCLUDE ADDITION OF AN ELECTRICAL OUTLET, MINOR AV PROJECTS, AND INSTALLING A NEW DOOR OR WALL IN OFFICE SPACE. SIGNATURE ① REQUIRED.

NON-ROUTINE / OTHER: ALL NON-ROUTINE REQUIRES SIGNATURE FROM THE DEAN OR APPROVED DESIGNEE AND AREA VICE PRESIDENT OR APPROVED DESIGNEE. EXAMPLES OF NON-ROUTINE INCLUDE SUITE RENOVATIONS, SIGNIFICANT ALTERATIONS TO INTERIOR OR EXTERIOR SPACES, AND ACCOMODATIONS MADE DUE TO LARGE EQUIPMENT PURCHASES AND DEPARTMENTAL RESTRUCTURING. SIGNATURE ① AND ② REQUIRED.

① DEAN OR APPROVED DESIGNEE:

(PLEASE PRINT NAME) _____

SIGNATURE _____

DATE: _____

EMAIL: _____

PHONE: _____

② AREA VICE PRESIDENT OR APPROVED DESIGNEE:

(PLEASE PRINT NAME) _____

SIGNATURE _____

DATE: _____

EMAIL: _____

PHONE: _____