

EMU CAPITAL PROJECT REQUEST FORM

STEP 1: PROJECT DESCRIPTION & REQUEST: (to be filled out by requesting Department)

Building / Facility: _____ Room: _____

Project Title: _____

- Please identify all items that are impacted or improved by the proposed project. Check all that apply:*
- | | |
|---|---|
| <input type="checkbox"/> Program Enhancement | <input type="checkbox"/> Safety |
| <input type="checkbox"/> Return On Investment (ROI) | <input type="checkbox"/> Accessibility |
| <input type="checkbox"/> Energy Conservation | <input type="checkbox"/> Asset Preservation (Maintain Existing Condition) |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

Project Impact Duration Permanent Improvement Temporary Improvement

Comments/Restrictions: _____

Requested Completion Date: _____ Reason for Requested Completion Date: _____
(Attach additional sheets if necessary)

Project Request Attachments (please provide the following / 1 page maximum per each attachment):	<u>Submission</u>	<u>Included</u>
1. Justification Statement (address the Needs, Justifications, and Impacts)	Required	Yes / No
2. Departmental / Divisional Business Plan (if any)	Preferred	Yes / No
3. Supporting Data / Statistics (if any)	Preferred	Yes / No
4. Sketches / Drawings / Graphics	Preferred	Yes / No

Project Request Approval (Required for Project Consideration):

Requesting Department / Division: _____ Acct. # for Funding of Investigations **Fund / Org / Program** (only to be used if required): _____

Project Champion Request: Person who will be Departmental Daily Contact for Project
Divisional Approval of Project Request: Divisional Vice President or Director Reporting to the President (as applicable)

Requestor/Champions Name (Type or Print Legibly) _____ Approvers Name (Type or Print Legibly) _____

Requestor/Champions Signature _____ Date _____ Approvers Signature _____ Date _____

(Division to forward to the Associate Vice President – Facilities at the Physical Plant, 875 Ann St. 734-487-3591)

STEP 2: ADMINISTRATIVE REVIEW:
(Gray area to be filled out by Administration)

STEP 3: PHYSICAL PLANT REVIEW
(Blue area to be filled out by Physical Plant)

<p>Project Priority: (circle one):</p> <p>EMERGENCY HIGH MEDIUM LOW DENIED</p>	<p>Physical Plant Comments:</p>
<p>Approved by: _____ Date: _____</p> <p>Signed: _____</p>	<p>ROM Start Date: _____ ROM Completion Date: _____</p> <p>ROM Cost Estimate: \$ _____</p> <p>Plant Estimator: _____</p>

Administrative Action – Please forward to the Physical Plant FPC for the following “Next Steps” (investigations may require funding):

<u>Service by Physical Plant</u>	<u>Service by Consultant</u>	<u>Service by Physical Plant or Consultant pending Request</u>
<input type="checkbox"/> ROM Estimate	<input type="checkbox"/> Feasibility Study	<input type="checkbox"/> Other: _____
<input type="checkbox"/> ROM Schedule	<input type="checkbox"/> Program Statement	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Space Analysis	<input type="checkbox"/> Conceptual Design	<input type="checkbox"/> Other: _____

(Administration to forward to Facilities Planning & Construction Department: Physical Plant, 875 Ann St. 734-487-4196)

EMU CAPITAL PROJECT REQUEST FORM

INSTRUCTIONS / GUIDELINES FOR THE EMU CAPITAL PROJECT REQUEST FORM

Step 1: *This Section shall be completed by the Project Champion and Approved by the Divisional Vice President, or the Director Reporting to the President. (White Section)*

- Identify the Project by Name, Location, and Proposed Scope of Work.
- Check the boxes identifying the associated impacts it will have to the building and/or campus.
- Prepare and include all “Attachments” to the Request Form.
 - Justification: Provide a written description identifying the purpose of the project. Please include information which will specifically address the Needs (why this project is proposed), the Justifications (why is this project the appropriate solution), and the Impacts (who it affects and how it affects them). Please identify all the positive and negative components of the project. A Justification is required to be submitted for proper review and prioritization of the project.
 - Business Plan: Provide a copy of pertinent sections of the Departmental / Divisional Business Plan, or a supporting business plan that specifically addresses the financial impact of the project.
 - Supporting Data: If other applicable data is available to support the project, please include this information.
 - Sketches / Drawings: If a concept of the desired layout, appearance, or project is available, please include a copy of this information.
- Identify any Restrictions or Special Comments associated with the project (e.g. Grant Funding, Timelines, etc.). Please provide copies of any supporting information regarding the Restrictions or Comments.
- Identify the proposed timeline the Department/Division would like to see the project completed within.
- Identify the Project Champion, and acquire approval signatures.
- Submit the Form and Attachments to the AVP-Facilities at the Physical Plant.

Step 2: *This Section shall be completed by the Administration / Project Prioritization. (Gray Section)*

- Prioritize the Project, mark the priority, and approve the next steps.
- Identify the requested Action (“next steps”) by the Physical Plant. Check the boxes that apply.
 - Please note that some work requests may require consultants or outside services which will need to be paid for by the requesting Division.
- Submit the Form and Attachments to the Facilities Planning and Construction Department at the Physical Plant for the proposed Action.

Step 3: *This Section shall be completed by the Facilities Planning and Construction Department. (Blue Section)*

- Log projects on a first-come-first-served basis with preferences as identified in the Prioritization.
- Determine if the Requested Action requires outside consultants.
 - If consultants are required, provide a quote for services to the Requesting Division for approval prior to proceeding with work. Acquire approval before work is performed.
- Perform the requested Action. Complete the information in the blue section where applicable.
- Submit the Form and Attachments to the AVP-Facilities at the Physical Plant for review with the Administration for further action and/or inclusion into Capital Outlay or University Capital Plans.

This process is for Capital Expenditures and Improvements only and not intended for custodial, general care, maintenance or operational purposes. Furthermore, this process is not for furniture requests. For inquiries regarding this form or process, please contact the Facilities Planning and Construction Department at the Physical Plant (734) 487 – 4196.