

# CAMPUS SERVICES PROJECT APPROVAL FORM

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

Work Request #: \_\_\_\_\_

## SECTION A - PROJECT REQUESTOR/COORDINATOR CONTACT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

## SECTION B - PROJECT INFORMATION

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

Requesting Department: \_\_\_\_\_

Contract Professional(s): \_\_\_\_\_

## SECTION C - PROJECT OVERVIEW AND SCOPE

Project Scope and Program: \_\_\_\_\_

Space Information: Is Requestor currently assigned to space?  Yes  No If no who is current occupant: \_\_\_\_\_

Building Name & Number: \_\_\_\_\_ Room Number/s: \_\_\_\_\_

Proposed Site Location(new facilities only): \_\_\_\_\_

Relationship to Existing Facilities(new facilities only): \_\_\_\_\_

## SECTION D - BUDGET AND FUNDING INFORMATION

Estimated Amount of Construction/Renovation: \_\_\_\_\_ Estimated Amount of Annual O&M: \_\_\_\_\_

Funding Source(s) for Construction/Renovation: \_\_\_\_\_ Funding Source of Annual O&M: \_\_\_\_\_

## SECTION E - APPROVALS

\_\_\_\_\_  
Vice President for Campus Services Date

\_\_\_\_\_  
Executive Vice President and Provost Date

\_\_\_\_\_  
Vice President for Budget and Planning Date

\_\_\_\_\_  
President Date

## INTERNAL USE ONLY

IHL #: \_\_\_\_\_ BOB #: \_\_\_\_\_ PDC #: \_\_\_\_\_ WR #: \_\_\_\_\_

# CAMPUS SERVICES PROJECT APPROVAL FORM

**Project Title:** \_\_\_\_\_ **Work Request #:** \_\_\_\_\_

Requestor \_\_\_\_\_ Date \_\_\_\_\_

Requestor Dean/Department Head/Director \_\_\_\_\_ Date \_\_\_\_\_

Requestor Vice President \_\_\_\_\_ Date \_\_\_\_\_

\*Current Space Occupant Department Head \_\_\_\_\_ Date \_\_\_\_\_

\*Signature indicates transferring space from one department to another; only sign if no box is checked on page 1 of form: **required if requestor does not currently occupy space.**

## SECTION F - MPDAC APPROVAL - completed by Associate Director Planning, Design & Space Management

Requires Space Needs Report?  YES  NO

MPDAC Scope, Site and Program Approval Date: \_\_\_\_\_

Requires Master Plan Committee Approval?  YES  NO

MPDAC Schematic Design Approval Date: \_\_\_\_\_

Assoc. Dir. Planning, Design & Space Mgmt. \_\_\_\_\_ Date \_\_\_\_\_

## SECTION G - CAMPUS SERVICES RECOMMENDATIONS

Assoc. Director of Con. & Budget Analysis \_\_\_\_\_ Date \_\_\_\_\_

Assoc. Director, Utilities \_\_\_\_\_ Date \_\_\_\_\_

Assoc. Director, Engineering Services \_\_\_\_\_ Date \_\_\_\_\_

Assoc. Director, Facilities Management \_\_\_\_\_ Date \_\_\_\_\_

Director of Planning, Design & Con. Admin. \_\_\_\_\_ Date \_\_\_\_\_

Director of Facilities Management \_\_\_\_\_ Date \_\_\_\_\_

Director of Parking and Transit \_\_\_\_\_ Date \_\_\_\_\_  
*(AS APPLICABLE)*

Assoc. Director, Business Operations \_\_\_\_\_ Date \_\_\_\_\_

Assoc. Director, Campus Landscape \_\_\_\_\_ Date \_\_\_\_\_  
*(AS APPLICABLE)*

Assist. Vice President of Campus Services \_\_\_\_\_ Date \_\_\_\_\_

### IMPORTANT NOTES

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>1. Construction must be performed by a licensed contractor or MSU Facilities Management.</li> <li>2. Projects must fully comply with MSU Design and Construction Standards.</li> <li>3. Projects requiring Master Plan Committee Approval must complete <b>all steps</b> of the Master Plan Approval Process.</li> <li>4. OPDCA must approve final construction documents; prior to any construction!</li> </ol> | <ol style="list-style-type: none"> <li>5. Projects must meet 2012 IBC &amp; 2010 ADAG.</li> <li>6. Projects in excess of \$75,000 must be designed by a professional licensed in the State of Mississippi.</li> </ol> |
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