

CAPITAL PROJECT AUTHORIZATION QUESTIONNAIRE

This questionnaire is designed to assist you in developing the scope of your project request. Your answers to the questions below will be used to develop a budget cost estimate for your project.

PROJECT TITLE: _____

PROJECT SUMMARY: _____

LOCATION OF THE PROPOSED PROJECT: _____

DO YOU ANTICIPATE THIS PROJECT WILL EXCEED \$10,000: _____

Do you have an existing design for your project? _____

Does your project need to be designed? _____

FURNITURE

Will you be purchasing furniture? _____

Is this furniture modular (cubicles)? _____

Will the furniture fit in the space? _____

Does the furniture require any electricity or voice and data? _____

SMART CLASSROOM TECHNOLOGY

Will you be purchasing any smart classroom technology? _____

Please indicate: _____ Podium _____ Projector _____ Electric Screen _____ Computer(s)

Do you need special window treatments? _____

MOVING

Will you need assistance with moving? _____

Will you need assistance with packing? _____

How many people are moving? _____

Are these people moving furniture or contents only? _____

LIGHTING

Does this project require any new lighting fixtures? _____

AIR CONDITIONING

Will you be air conditioning this space? _____

SECURITY

Will this project include specific security needs? _____

Please indicate: _____ Card access reader _____ Panic alarm _____ Camera

_____ Emergency Telephone If so, how many

VOICE DATA

Will you purchase computers on this project? _____ If so, how many? _____

Will you need additional telephones? _____ If so, how many? _____

PROGRAM

What program needs should we be aware of? _____

EQUIPMENT

Will you be purchasing any equipment on this project that will need electricity, plumbing, ventilation, or voice/data? _____