

K-State Facilities - Project Estimate Request Form

Requester to complete Section I. and send to faccustomerservice@ksu.edu

Estimate Work Order #:
(Assigned by Service Desk)

For information/clarifications refer to PPM 7810.050/7830.

I. Contact & Project Information *(This section to be completed by Requester)*

Primary Contact: Dept:
Name Email Date

College:

Anticipated Total Project Cost: Less than \$1,000,000 More than \$1,000,000

Anticipated Project Scope:

Small Maintenance/Repair: paint, carpet, move outlet
 Small/Medium Remodeling: reconfiguring of existing space ie walls, doors, cabinets
 New Building
 Building Addition
Exterior site work:
 landscape / Plaza / Play Field / Pens

Bldg Name/Location Room No./Floor/Area

Project Timeline Target Budget

Desired Project Scope (Attach separate sheet if needed)

Estimate Submission Approval:

Vice President/Dean Signature

Date

II. Facilities Estimate - Opinion of Cost & Scope *(This section to be completed by Facilities & Campus Planning)*

Total Project Cost:

Project Duration: Campus Planning Project Manager (name/email):

Environmental & Code Notes:

Env. Hazards Survey Required / Conducted: Yes No
Abatement may be Required: Yes No
Potential Code Footprint update required: Yes No
Design Services Required: Yes No

Project Manager Scope Clarifications & Opinion of Cost:

III. Estimate Acceptance - Request to Proceed with Project (Program/Design)

(This section to be completed by Requester after Facilities & Campus Planning completes Section II)

Project Approval:

Vice President/Dean Signature

Date

Department FIS Funding Information

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Project

Source

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