CAPITAL PROJECT REQUEST FORM

INFORMATION TO BE COMPLETED BY REQUESTING ENTITY

NOTE: To delete any tip (such as this), select it and start typing. To remove entirely, select a tip and press Spacebar to remove it.

1. Project Location *Where the project will take place. Identify campus, building(s), and/or site. Include room numbers of rooms to be altered in a renovation project.*

Identify campus, building(s), and/or site.

2. Customer Information *Project sponsor or stakeholders who will be impacted by this project.*

Full name of University unit(s) making the request: *Identify school, college, department, institute, or academy.*

Identify school, college, department, institute, or academy.

Name & contact information of person making request: *Primary Customer contact including email address, office phone, and mobile phone.*

Primary Customer contact including email address, office phone, & mobile phone.

Name & contact information of person within Customer organization that has decision-making authority regarding scope, schedule, & budget for this project: *Provide name, email address, office phone, and mobile phone.*

Provide name, email address, office phone, & mobile phone.

Name & contact information of person within Customer organization to notify in the event of an emergency: *Provide name, email address, office phone, and mobile phone.*

Provide name, email address, office phone, & mobile phone.

3. Project Scope *Project scope defines the boundaries of a project. Think of the scope as an imaginary box that will enclose all the project elements. It not only defines the work that you want performed (what goes into the box), but also sets limits for what will not be done as part of the project (what is NOT in the box). Scope identifies what will be done, what will not be done, and what the result will look like.*

If the Project is a Building Expansion, identify which building: *Indicate Building &, Floor(s).* *Building #1, Floors*

Type of project: *Check all applicable boxes.*

☐ Wet Laboratory ☐ Dry Laboratory

☐ Faculty Office(s) ☐ Administrative Office(s)

☐ Food Service ☐ Housing

☐ Student Space (Classroom, Auditorium, Teaching Lab)

☐ Student Support Space (Lounge, Study Area, Group Meeting Rooms, Lockers/Storage)

☐ Clinical

☐ Other *Describe if none of the above apply.* *Enter description*

Scope Narrative: *Identify the intended physical features and/or modifications to the space(s) comprising the project. Include specific expectations and requirements for the completed project as applicable to the project types above.*

Enter general description or narrative.

Special accreditation requirements: *Identify any certifications, inspections, or licensing required based on the use(s) intended.*

List all applicable requirements

Space Requirements: Provide specific space requirements, such as a specific amount of assigned square-footage committed by contract to a particular occupant. List all such contractual and non-contractual space commitments you expect to be implemented in the space plan.

List all applicable requirements

Project Documentation already available: *Check all that apply & include documentation with Project Request Form submission.*

☐ Rendering/Photo ☐ Diagrams/Sketches ☐ Space Plans

☐ Space Program ☐ Business Plan/Statement

☐ Other: *Describe if none of the above apply.*

List documents available

4. Schedule *A project's schedule includes not just the time it takes to modify space or construct a building. There is typically a period for planning and design, followed by approvals from local agencies and from USC Senior Administration. Even after construction is complete, FPM continues to work on completing all project documentation and closing out all financial obligations.*

Completion Date: *Date by which you expect to occupy the completed space(s).*

Click or tap to enter a date.

Describe the factors that necessitate the above completion date and the potential impacts of failing to occupy by the expected date.

Enter description.

Identify any deadlines or due dates required by start dates for new hires, donors, grants, and/or entities outside USC.

Enter deadlines or due dates and explain.

Describe any phased implementation of the project. For example, will parts of the project be occupied incrementally or all at once?

Enter description.

Special Schedule Considerations: *Identify any restrictions in the work hours (can only work between certain hours in order to avoid disruption to on-going academic, research or administrative activities, etc.), special events that will prevent work, etc.*

Enter special considerations.

5. Budget and Funding

A legitimate funding is source is required for FPM to undertake any work, including preliminary investigations and hiring design consultants. Transparency about your project budget expectation is key to FPM providing the appropriate services and completing the work in an expeditious manner.

Total project cost to be managed by FPM (*TOTAL PROJECT COST = Cost for EVERYTHING related to the project, including construction, furniture, equipment, signage, moving expenses, and consultant fees. You will be committing this amount via an Internal Requisition to FPM.)***: $** *Enter amount*

List all work you propose to manage and pay for directly (an example would be packing/moving/storage costs),

How will the project be funded? *Check all that apply & list specific source(s) (by account name/number) for the funding of the project.*

☐ **Operational Funds** **Account Name** *Enter name* **Number** *Enter number*

☐ **Donor** **Account Name** *Enter name* **Number** *Enter number*

Amount of donor funding sought: $ *Enter amount*
Total amount of gifts on hand: $ *Enter amount*
Total amount of pledges: $ *Enter amount*
Schedule for receiving pledged amounts: *Indicate amount and due date*
Amount, Due Date
Amount, Due Date
Amount, Due Date
Add items as needed

☐**Grant – Already Approved** *Provide copy of grant document(s) that indicate requirements, rules, restrictions on use of funds for design and/or construction costs, etc.*

Source of grant funding: *Identify institution or agency.*
Identify source
Total amount of grant funds that can be applied to design phase of project: *Enter amount*
$ *Enter amount*
Total amount of grant funds that can be applied to construction phase of project: *Enter amount*
$ *Enter amount*

☐ **Grant – Application in process or to be submitted** *Provide copy of grant document(s) that indicate requirements, rules, restrictions on use of funds for design and/or construction costs, etc.*

Source of grant funding: *Identify institution or agency.*
Identify source
Total amount of grant funds that can be applied to design phase of project: *Enter amount*
$ *Enter amount*
Total amount of grant funds that can be applied to construction phase of project: *Enter amount*
$ *Enter amount*

☐ **Provost Reserve** **Account Name** *Enter name* **Number** *Enter number*

Has approval been obtained from the Provost? ☐ Yes ☐ No

☐ **Asset Renewal** **Account Name** *Enter name* **Number** *Enter number*

☐ **Facilities Infrastructure Fund (FIF)** **Account Name** *Enter name* **Number** *Enter number*

☐ **Debt**

☐ **Corporate Funding (President or Provost funded)**

☐ **Other** *Describe if none of the above apply.*

Identify funds

6. Customer Value Assessment

Provide the Customer Value Assessment based on the definitions below. Describe or attach a separate document to explain specifically how the project meets the definition of the Customer Value selected below.

☐ **Urgent:** Project required on a timeline that cannot be deferred, such as a funded grant deadline or schedule commitment to donor in an executed donor agreement, or in order to recruit a faculty member who has already accepted an offer, or a confirmed* business case based on immediate opportunity, and for which no mitigation measures exist.

Supporting information/description of project value.

☐ **Essential:** Project required for execution of confirmed program and/or research commitment with grant funding or confirmed* business case based on opportunity with an extended timeline, and considered critical to the on-going successful operation or accreditation of the program, research and/or business plan.

Supporting information/description of project value.

☐ **Important:** Project required to enhance or expand existing program or research space, including existing program consolidation or growth.

Supporting information/description of project value.

☐ **Discretionary:** Project that can be deferred, possibly creating inconvenience, but with possible mitigation measures and/or deferral not seriously detrimental to confirmed* program, research and/or business plan.

Supporting information/description of project value.

**** NOTE: "Confirmed" defined to mean program/research/business plan has been discussed/approved, as appropriate, by Provost (for academic programs) or by appropriate Senior Vice President (as may be delegated) for administrative and athletic programs.***

7. Attachments to Project Request Form *Thank you for completing the Project Request Form. Please remember to include any documents requested above. Documents in electronic format (PDF, MS Word, or Excel) are preferred, but if you have large format prints, we can arrange to have them picked up from your location.*

List of Customer attachments included with Project Request Form: *Identify document description and file name.*

Document #1 description and file name

Document #2 description and file name

Document #3 description and file name

Add items as needed

REQUESTOR SIGNATURE *Must be signed by the requesting Department's Director or Authorized Agent*

Enter Name, Title **DATE** *Click or tap to enter a date.*

NEXT STEPS

Please email the Project Request Form to xxxxxx@usc.edu along with all attachments. You will receive an email confirmation that your submission has been received. FPM staff will review this for completeness and will notify you within five (5) business days if additional information is needed before we can process your Project Request. If the information is complete, you will receive an email identifying the FPM manager assigned to your project.

Thank you for submitting your Project Request.
We look forward to working with you!