

**INTERDEPARTMENTAL REQUISITION FOR MINOR CAPITAL PROJECTS (Over \$35k)**  
 University of California, Davis

**BOX A** *To be filled out by DCM*

<b>Bldg Name</b>		<b>Project Number</b>	
<i>Zone No. (FM Only)</i>	<i>Room No.</i>	<i>Work Order Numbers (FM Only)</i>	
<i>CAAN No.</i>	<i>Added Sq Ft.</i>	<i>Work Order Numbers (FM Only)</i>	

**Scope of Work:** Simple description of the scope of the project. Attach additional sheets if required.

**Reference Documents:**

- JES or Draft CIB
- Schematics and/or Scope Document
- Schedule

**Budget :**

<b>BUDGET:</b>	
<b>Sub 0,1,2,4</b> Construction	
<b>Sub 5, 6, 7</b> Fees, Plans, Supervision	
<b>Sub 8</b> Special Items	
<b>Sub 9</b> Contingency	
<b>Sub 3</b> Equipment (Movable)	
<b>Total Project Cost</b>	

**PROJECT TYPE** (check all that apply):

- Minor Cap Project (over \$35k)
- Estimate / Study / Feasibility
- Remodel / Renovation
- New Building / Building Addition
- Maintenance
- Other ( Insert text)

**BOX B** *To be filled out by the Requesting Department (May be filled out by DCM with Department's permission)*

Loc	"Account	Sub	Object	Proj	Lien Amount	Contact Person:
						Department:
						Telephone:

**Justification:** Include a justification statement for this work.

**BOX C** *To be filled out by those with Approval Authority*

<p><b>Requesting Department:</b></p> <hr/> <p><i>Signature</i> _____ <i>Date</i> _____</p> <hr/> <p><i>Print Name</i> _____</p> <hr/> <p><i>Title (Dean, Asst. Dean/Vice Chancellor, or AVC)</i> _____</p>	<p><b>DCM Representative:</b></p> <hr/> <p><i>PM / IPE Signature</i> _____ <i>Date</i> _____</p> <hr/> <p><i>Print Name:</i> _____</p> <hr/> <p><i>Supervisor Signature</i> _____ <i>Date</i> _____</p>	<p><b>Environmental Approval:</b></p> <hr/> <p><i>Signature</i> _____ <i>Date</i> _____</p> <p><input type="checkbox"/> Consistent with LRDP or not applicable</p> <p><input type="checkbox"/> CEQA Exemption Class _____</p> <p><input type="checkbox"/> <b>NO</b> Additional Review Required</p> <p><input type="checkbox"/> <b>YES</b> Additional Review Required (see attached)</p> <p><input type="checkbox"/> PRG review required</p> <p style="color: red;"><i>Approval only required for Projects over \$35,000 or that add assignable sq. ft.</i></p>
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**BOX D** *To be filled by CAA*

Loc	Account	Sub	Object	Project	A&E Req Number	Approved for Funds – Accounting Office