## **FUNDING REQUEST FORM**

(New Requests, Existing Contracts & Solicitations)

PROJECT/CONTRAC	PROJECT/CONTRACT TITLE & NUMBER: DATE:					
PROJECT MANAGE	RS, CONTRA	CT MANA	AGERS, CONSULTANT:			
Project Manager:		PHONE:		EMAIL:		
Contract Manager:		PHONE:		EMAIL:		
Consultant:		PHONE:		EMAIL:		
PROJECT/ CONTRACT DESCRIPTION:						
ADVISORY BOARD/0	COMMITTE	E RECOM	MENDATION(S): (If Ap	olicable)		
ADVISORY BOARD/COMMITTEE RECOMMENDATION(S): (If Applicable)  Date Board/Committee Comments						
ENGINEERING ESTIMATE (If Applicable):						
CONTRACT FINANC	CIAL INFORM	MATION:				
Amount Accoun		t No. Project String		Source of Funds		
Total:	al:		Management & Budget Director:			
FISCAL IMPACT STATEMENT (REQUIRED for Commission Items):						
		1				
GRANT Yes No FUNDED		SOURCE:		AGREEMENT NO.		
SUBMITTED AND APPROVED BY:						
Submitted By:		Department Director:		Date Received By Procurement:		

## **ATTACHMENT(S)** (if applicable to request):

- 1. Project Checklist
- 2. Special Conditions (If Applicable)
- 3. Desired Timeline

- 4. Construction Plans (If Applicable)
- 5. Scope of Services/Scope of Work
- 6. Technical Specification (If Applicable)