

University of Washington Bothell
Physical Planning & Space Management
Project Request Form

New Project Information

To be completed by requestor

Date Request Submitted

Requesting Program/Department

Building

Room #

Contact Name

Contact Phone

Contact Email

Department Head

Budget # or fund source

Project Definition

Please choose the service(s) needed:

☐

Furniture request (IF)

☐

Space reconfiguration (cubicles) (MA)

☐

Move coordination (IF)

☐

Alteration (change in walls, doors, electrical work, etc.) (MAC)

☐

Remodel (MR)

☐

New Construction (NC)

☐

Other (O)

Project Description

Requested Completion Date

You will receive an email confirmation and project number within 5 business days.

For PPSM Use

Project #

Previous project

Y / N

Previous #

Project Name

Date email confirmation sent: