

# LAFAYETTE COLLEGE CAPITAL PROJECT REQUEST FORM

## STEP 1 - REQUEST INITIATION

TO BE COMPLETED BY PROJECT REQUESTOR AND RETURNED TO THE DEPARTMENT OF FACILITIES PLANNING & CONSTRUCTION

Location Bldg./Rm. \_\_\_\_\_

Project Title \_\_\_\_\_

Project Justification and Description - include building, room number and scope of work (attach additional pages if needed)

Environmental Benefits \_\_\_\_\_

Existing Program

New Program

Intended Occupants \_\_\_\_\_

If Existing Program:  
Will Current Location be Vacated?

Yes  No

Facilities Required: # Classrooms \_\_\_\_\_

If yes, Available Square Footage \_\_\_\_\_

# Offices \_\_\_\_\_

Condition of Current Location

Poor

# Labs \_\_\_\_\_

Average

Expected Growth Over 5-10 Years \_\_\_\_\_

Excellent

**Proposed Funding Source** (e.g., Department Funds, Division Funds, Restricted Funds, Capital Budget Request, etc.)

### SIGNATURES REQUIRED (Print and Sign Your Name):

Requestor & Department \_\_\_\_\_ Ext. \_\_\_\_\_ Date \_\_\_\_\_

Department Head Approval \_\_\_\_\_ Ext. \_\_\_\_\_ Date \_\_\_\_\_

Division Head Approval \_\_\_\_\_ Ext. \_\_\_\_\_ Date \_\_\_\_\_

Department Budget/Cost Estimate (complete only if estimated cost or range is known, otherwise, leave blank) Budget Est. \$ \_\_\_\_\_

Have you included all costs for the project? Yes No Yes No

Electricity (outlets, capacity) \_\_\_\_\_ IT/AV/Tel/Data \_\_\_\_\_

Water and Drainage \_\_\_\_\_ Furnishings \_\_\_\_\_

Air conditioning & Ventilation \_\_\_\_\_ Moving \_\_\_\_\_

### PROJECT APPROVAL IS DEPENDENT ON COMPLETION OF STEPS 2 THROUGH 6 BY VARIOUS CAMPUS DEPARTMENTS

Step 2 - REVIEW COMPLIANCE WITH STRATEGIC PLAN & CAMPUS MASTER PLAN (completed by Planning & Construction)

Step 3 - VERIFY SCOPE AND ESTIMATED COSTS (completed by Plant Operations and the Department of Planning & Construction)

Step 4 - DETERMINE FUNDING SOURCES (completed by Division Heads, VP of Business Affairs & Treasurer, and Development Office, if gift related)

Step 5 - REVIEW BY VICE PRESIDENT FOR BUSINESS AFFAIRS & TREASURER

Step 6 - PROJECT APPROVAL (by Administration and, if applicable, Board)

Please feel free to contact the Department of Planning and Construction at extension 5370 with any questions

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# LAFAYETTE COLLEGE CAPITAL PROJECT REQUEST FORM

STEP 2 - REVIEW OF COMPLIANCE WITH STRATEGIC PLAN & CAMPUS MASTER PLAN  
TO BE COMPLETED BY THE DEPARTMENT OF PLANNING & CONSTRUCTION

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Project Title \_\_\_\_\_  
Strategic & Master Plan Compliance \_\_\_\_\_  
\_\_\_\_\_

Optimal Location for Function \_\_\_\_\_  
Critical Adjacency Issues \_\_\_\_\_  
Visibility or Identity Issues \_\_\_\_\_  
Ability to Accommodate Growth \_\_\_\_\_  
Renovations for Vacated Space \_\_\_\_\_  
Environmental Benefits \_\_\_\_\_  
Technical Issues \_\_\_\_\_

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**SIGNATURES REQUIRED:**

**Dir of Planning & Construction** \_\_\_\_\_ **Date** \_\_\_\_\_

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STEP 3 - VERIFY SCOPE AND ESTIMATED COSTS

TO BE COMPLETED BY PLANT OPERATIONS AND PLANNING & CONSTRUCTION

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Confirmed Estimate \$ \_\_\_\_\_  
Other Costs Tangential to Project \$ \_\_\_\_\_  
Est. Future Annual Operating Costs \$ \_\_\_\_\_

New Project or  Required Maintenance  
Est. Project Duration \_\_\_\_\_

**SIGNATURES REQUIRED:**

**Director of Plant Operations** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Dir of Planning & Construction** \_\_\_\_\_ **Date** \_\_\_\_\_

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STEP 4 - DETERMINE FUNDING SOURCES

TO BE COMPLETED BY DIVISION HEADS, VP OF BUSINESS AFFAIRS & TREASURER, AND DEVELOPMENT OFFICE

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Funding Amounts	Sources of Funding	Restricted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
\$ _____	_____	Restricted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
\$ _____	_____	Restricted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
\$ _____	_____	Restricted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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# LAFAYETTE COLLEGE CAPITAL PROJECT REQUEST FORM

STEP 5 - REVIEW BY VICE PRESIDENT FOR BUSINESS AFFAIRS & TREASURER

TO BE COMPLETED BY VP FOR BUSINESS AFFAIRS & TREASURER

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Net Value of Funding Sources (Discounted 5% per annum)

\$

Budget/Approval Cycle & Division Priority

Offsetting New Revenues (if any)

\$

October

Project Shortfall/Surplus

\$

Annualized Cost of Project Funding Shortfall (6% cap rate; P&I)

\$

March

Annual Operating Costs / Required From Operations

\$

Total Annualized Net Cost of Project

\$

Emergent

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## STEP 6 - PROJECT APPROVAL

TO BE COMPLETED BY ADMINISTRATION AND, IF APPLICABLE, BOARD OF TRUSTEES

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For All Gift Funded Projects

VP for Development

Date

For All Capital Projects

Director of Facilities Planning & Construction

Date

Director of Plant Operations

Date

VP for Business Affairs & Treasurer

Date

For Projects > \$25,000

President

Date

Board Resolution Required for Projects > \$100,000

Type of Vote

\_\_\_ Meeting

\_\_\_ Telephone

\_\_\_ E-mail

Date

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## GENERAL INFORMATION

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Client Contact Name & Phone No.

Est Start Date

Facilities Contact Name & Phone No.

Est End Date

Fiscal Year and Project Number

BANNER #

Facilities Project Designation

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