**PROJECT INTAKE FORM Date:**

*Please use this form to initiate a new Planning, Design and Construction (PD &C) project,*

*PD &C services are required on all UCCS projects that:*

1. *Modify an existing space*
2. *Increase/decrease the number of occupants within an existing space*
3. *Change the function of an existing space (i.e. Changing a conference room into an office)*
4. *Results in new facility construction*
5. *Requires planning or design consultancy*
6. *Requires the reconfiguration of furniture in an existing space.*

**Stakeholder Name:**

**School/College/Office:**

**Phone Number:**

**Email:**

**Funding Source:**

**Anticipated Budget:**

**Anticipated Completion Date:**

**Request:** *Please provide a brief description of your request including any special concerns. (For ie. acoustics, security, etc.)*

**Does your request involve a "change of function"?** (see item 3 above and Campus Policy 400-011)

Date approved for Change of Use:

Approved by:

**Please submit this form to:**

University Architect

Carolyn Fox

Cfox3@uccs.edu

*Next steps: We will contact you to discuss the project parameters and anticipated schedule.*

**For Planning, Design & Construction use only**

Assigned to Project Manager

Name:

Date: