



DOCUMENT REQUEST FORM (FP-100)
Facilities Planning & Construction Sensitive Data

All information must be filled out by the UCF Requestor

Please complete the following information and forward to Maritza Tibbets at maritza.tibbetts@ucf.edu

REQUESTING UCF DEPARTMENT INFORMATION:

Date: _____

Requestor Name: _____ Project Title: _____

Requestor Name: _____ Project Title: _____

MP/UCF# _____ FO# _____ WO# _____

BID/ITN# _____ OTHER # _____ PO# _____

Contract vehicle for Business: _____ Contract Value: _____

Piggyback Contract (provide details): _____ UCF Procurement Approved? Y N

Other (provide details): _____ UCF Procurement Approved? Y N

REQUESTING BUSINESS INFORMATION:

Requesting Business: _____ Contact Name: _____

Mailing Address: _____ City: _____ Zip code: _____

Website: _____ Email: _____ Tel: _____

FILES REQUESTED:

Building Name: _____ Building Number: _____ Room Number(s): _____

Scope of work:

New Construction Repair/Replace/Renovate Alteration/Addition/Remodel Demo/Remove Site/Utility

File Types Requested:

Architectural Civil/Site Mechanical Electrical Plumbing Structural Fire Life Safety
Specifications Reports O & M Close Out Warranty Ground Roof Other

Project description, or purpose/need for sensitive data (must be filled out / use additional pages as necessary):

Detailed description of sensitive data requested (describe specifics of files requested):

UCF Requestor: _____

Signature

Title

Date

For internal use only: UCF NON-DISCLOSURE AGREEMENT (NDA) has been signed by the requesting organization and is on file.

NDA rec'd (date): _____ Approved: _____

BILL MARTIN
UCF Director, Facilities Planning and Construction
Date: _____