



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 Tibbetts at maritza.tibbetts@ucf.edu

REQUESTING UCF DEPARTMENT INFORMATION:

Date: \_\_\_\_\_

Requestor Name: \_\_\_\_\_ Project Title: \_\_\_\_\_

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MP/UCF# \_\_\_\_\_ FO# \_\_\_\_\_ WO# \_\_\_\_\_

BID/ITN# \_\_\_\_\_ OTHER # \_\_\_\_\_ PO# \_\_\_\_\_

Contract vehicle for Business: Continuing Service Vendor 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: \_\_\_\_\_