

## FACILITIES & SAFETY NON-RECURRING FUNDING REQUEST

Project/WO #: \_\_\_\_\_ Date: \_\_\_\_\_ Included in Fixed Capital Outlay Yes No

Request/Project Title: \_\_\_\_\_

F&S Unit (Department): \_\_\_\_\_

Requestor Name: \_\_\_\_\_

Anticipated Start Date: \_\_\_\_\_ Anticipated End Date: \_\_\_\_\_

Request/Project Description/Schedule - Provide all supporting documentation:

| Item  | Vendor | Amount |
|---|--------|--------|
| Design  |        |        |
| Construction  |        |        |
| Professional Services                               |        |        |
| Building Code (BCO)                                 |        |        |
| State Fire Marshal (SFM)                            |        |        |
| Telecom   |        |        |
| Installation  |        |        |
| Delivery  |        |        |
| Miscellaneous (see miscellaneous description above) |        |        |
| <b>Project Total:</b>                               |        |        |

| REQUESTOR USE ONLY<br>PROJECTS ONLY | FSBO ASST USE<br>ONLY | AVP USE ONLY         | FSBO USE ONLY                     |
|-------------------------------------|-----------------------|----------------------|-----------------------------------|
| Project/WO#                         | <b>F&amp;S #</b>      | Sum of Digits (PECO) | Funds Transferred to: Project #   |
| Qualifications Basis selection:     | Date:                 | Deferred Maintenance | FSBO will process Purchase Orders |
| eBQuotes                            | Initials:             | AVP Operations       | Updated in FCO                    |
| Criteria-based selection            |                       | Other                | Verification of Funding:          |
| Rotation                            |                       | AVP Signature        | Accountant III Signature          |
|                                     |                       | Date                 | Date                              |



## **FACILITIES & SAFETY NON-RECURRING FUNDING REQUEST FORM**

(replaces UIMP CARRYFORWARD Funding Request Form)

**IMPORTANT: Form must be assigned a F&S Funding Request # from the Business Office prior to being submitted to Interim Associate Vice President (AVP)**

**Please note: F&S Funding Requests should have a Project # or Work Order # indicated on the form, if applicable**

### **Steps for routing the form:**

1. Requestor to complete form including Requestor Use Only section and attach backup documentation
  - a. Submit hard copies to F&S Business Office: Rita Higgins
2. Rita Higgins will log and route for AVP approval
3. AVP to return request to Rita Higgins
4. Rita Higgins will log and email the requestor(s) of approval/denial and will submit approved form to Nester Garcia for further processing (funding source allocation)
5. Business Office accountant issues a requisition, if necessary
6. If requisition was issued - Procurement Office issues Purchase Order
  - a. Emails PO to requestor
7. Nester Garcia will return form to Rita Higgins
8. Rita Higgins will update log with funding source information and will save request on L Drive and place hard copies of requests in binder

Please note: requestor can check the status of request (requires access):

<L:\FS General Area\F&S Funding\F&S Funding Log>

Copies of the requests are also located in (requires access):

<L:\FS General Area\F&S Funding\F&S Funding Log Requests>

**Project/WO# - complete if project related, required**

**Fixed Capital Outlay Required = any project over \$1M**

**Requestor Use Only Section - complete if project related**

### FACILITIES & SAFETY NON-RECURRING FUNDING REQUEST

Project/WO #:  Date:  Included in Fixed Capital Outlay  Yes  No

Request/Project Title:

F&S Unit (Department):

Requestor Name:

Anticipated Start Date:  Anticipated End Date:

Request/Project Description/Schedule - Provide all supporting documentation:

| Item   | Vendor               | Amount                               |
|--|----------------------|--------------------------------------|
| <input type="checkbox"/> Design  | <input type="text"/> | <input type="text"/>                 |
| <input type="checkbox"/> Construction  | <input type="text"/> | <input type="text"/>                 |
| <input type="checkbox"/> Professional Services                               | <input type="text"/> | <input type="text"/>                 |
| <input type="checkbox"/> Building Code (BCO)                                 |                      | <input type="text"/>                 |
| <input type="checkbox"/> State Fire Marshal (SFM)                            |                      | <input type="text"/>                 |
| <input type="checkbox"/> Telecom   |                      | <input type="text"/>                 |
| <input type="checkbox"/> Installation  |                      | <input type="text"/>                 |
| <input type="checkbox"/> Delivery  |                      | <input type="text"/>                 |
| <input type="checkbox"/> Miscellaneous (see miscellaneous description above) |                      | <input type="text"/>                 |
| <b>Project Total:</b>  |                      | <input type="text" value="\$ 0.00"/> |

**REQUESTOR USE ONLY  
PROJECTS ONLY**

Project/WO#

Qualifications Basis selection:

eBQuotes

Criteria-based selection

Rotation

**FSBO ASST USE ONLY**

F&S #

Date:

Initials:

**AVP USE ONLY**

Sum of Digits (PECO)

Deferred Maintenance

AVP Operations

Other:

AVP Signature  Date

**FSBO USE ONLY**

Funds Transferred to: Project #

FSBO will process Purchase Orders

Updated in FCO

Verification of Funding:

Accountant III Signature  Date

Revised 10/29/19

- Please complete the following required information:
  - Project/Work Order # (if applicable)
  - Date
  - Included in Fixed Capital Outlay (Yes = projects over \$1M)
    - Select Yes or No
  - Request/Project Title
  - F&S Unit (Department)
  - Requestor Name
  - Anticipated Start Date
  - Anticipated End Date
  - Request/Project Description/Schedule
    - Enter detailed description/schedule
      - Provide supporting documentation
- Items/Vendor/Amount
  - Place a check mark next to applicable item
    - Enter Vendor (if applicable)
      - Design
      - Construction
      - Professional Services
- Enter \$ Amount
- Enter Project Total

## Requestor Use Only

- Please note: Requestor Use Only Section - check off only if request is project related – if it is project related and left blank, the form will have to be returned to the Requestor for selection

**REQUESTOR USE ONLY  
PROJECTS ONLY**

Project/WO# \_\_\_\_\_

Qualifications Basis selection:

eBQuotes

Criteria-based selection

Rotation

- Once the Requestor has completed the form
  - Follow instructions on page 1
    - Steps for routing the form (also illustrated below)

## Routing:

- 1 Requestor Use Only – submit to FSBO
- 2 FSBO Asst Use Only: Rita Higgins
- 3 AVP Use Only: Duane Siemen
- 4 FSBO Use Only: Nester Garcia

| 1   | 2   | 3   | 4   |
|---|---|---|---|
| <p style="text-align: center;"><b>REQUESTOR USE ONLY<br/>PROJECTS ONLY</b></p> <p>Project/WO# _____</p> <p>Qualifications Basis selection:</p> <p><input type="checkbox"/> eBQuotes</p> <p><input type="checkbox"/> Criteria-based selection</p> <p><input type="checkbox"/> Rotation</p> | <p style="text-align: center;"><b>FSBO ASST USE ONLY</b></p> <p>F&amp;S # _____</p> <p>Date: _____</p> <p>Initials: _____</p> | <p style="text-align: center;"><b>AVP USE ONLY</b></p> <p><input type="checkbox"/> Sum of Digits (PECO)</p> <p><input type="checkbox"/> Deferred Maintenance</p> <p><input type="checkbox"/> AVP Operations</p> <p><input type="checkbox"/> Other _____</p> <p>AVP Signature _____ Date _____</p> | <p style="text-align: center;"><b>FSBO USE ONLY</b></p> <p><input type="checkbox"/> Funds Transferred to: Project #</p> <p><input type="checkbox"/> FSBO will process Purchase Orders</p> <p><input type="checkbox"/> Updated in FCO</p> <p>Verification of Funding:</p> <p>Accountant III Signature _____ Date _____</p> |

Revised 10/29/19

**NON-RECURRING FUNDING REQUEST FORM  
SEPTEMBER 2019**

