# Request for Facilities Management Services

(Form rev. 10/21/15) Please complete sections A-E below and submit to the FM Work Control Center
1300 Service Building (003) • Tel 301.405.2222

## A. Requester Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Email:</td>
</tr>
<tr>
<td>Department:</td>
<td></td>
</tr>
</tbody>
</table>

## B. Description of Service  (Select type and describe service)

- [ ] Maintenance/Repair
- [ ] Billable Services
- [ ] Renovations
- [ ] Lease for Rental Space

<table>
<thead>
<tr>
<th>Location of Work: Building</th>
</tr>
</thead>
<tbody>
<tr>
<td>Room(s) or campus area</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Desired Date/Time of Delivery:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Service Requested:</th>
</tr>
</thead>
</table>

## C. Financial Information  (not required for Maintenance requests)

<table>
<thead>
<tr>
<th>Billing Department:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Billing Address:</td>
</tr>
<tr>
<td>Contact Person:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Payment Method(s)</th>
<th>Fund Source Account #</th>
<th>Funding Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fund from campus account(s):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Requesting funding from a campus, State or external source:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## D. Request Authorization

Select an authorization option for your request and sign:

- [ ] I request delivery of the services described above and authorize payment of all associated costs.
- [ ] I request a detailed project budget for the services described above. This option is required if campus or State funding is requested.

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>______________________________</td>
<td>________________</td>
</tr>
</tbody>
</table>

## E. Approvals  (required for all Lease Requests, Renovations and New Construction where campus or State funds are requested)

<table>
<thead>
<tr>
<th>Dean / Director</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>______________________________</td>
<td>________________</td>
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</table>

<table>
<thead>
<tr>
<th>Vice President</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>______________________________</td>
<td>________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FM use-W.O. / Project #:</th>
<th>Unit:</th>
</tr>
</thead>
<tbody>
<tr>
<td>_________________________</td>
<td>____________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Title:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>____________________________</td>
<td>________________</td>
</tr>
</tbody>
</table>
# Instructions for the "Request for Facilities Management Services" (rev. 10/21/15)

Please complete sections A - E and forward to Facilities Management Work Control Center, Room 1300, Service Building

<table>
<thead>
<tr>
<th>Section</th>
<th>Field</th>
<th>Instructions for Entering Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>A - Requester Information</td>
<td>Name</td>
<td>Name of the primary customer for these services.</td>
</tr>
<tr>
<td></td>
<td>Phone</td>
<td>Campus, business, or personal telephone number</td>
</tr>
<tr>
<td></td>
<td>Email</td>
<td>Full email address</td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Requester's campus or business title</td>
</tr>
</tbody>
</table>
| B - Description of Service| Type of Service                | Maintenance/Repair is the recurrent, day to day, periodic or scheduled work required to preserve or restore a facility to such condition that it can be effectively used for its designated purpose.  
Billable Services include support for campus moves, event support and other services not covered elsewhere.  
Renovations are facility improvements or new construction projects that cost under $5 million;  
Lease requests for space are for additional space requirements that may be located in rental facilities off-campus. |
|                          | Location of Work               | Provide the building and room(s) or campus area where the services will be delivered or work will be executed.             |
|                          | Desired Date / Time of Delivery| If the delivery of the service is time sensitive, provide an indication of when you desire delivery.                        |
|                          | Description of the Services Requested| Provide a brief description of the services you need or what goal you desire.                                                |
| C - Financial Information| Billing Dept.                  | Provide the department / unit to be billed for these services.                                                             |
|                          | Contact Person                 | Provide the financial contact (if different than the requester).                                                           |
|                          | Billing Address                | Provide the building / room where any financial information should be mailed                                                |
|                          | Payment Methods and Funding Source Accounts and Amounts | Three types of payment methods are available - campus accounts, a personal account, or State or external funding accounts.  
Campus accounts - Provide the Kuali (KFS) account code(s) and amount if available.  
Requesting funding from a campus, State, or external source - Provide the type of funding you are requesting if available. |
| D - Request Authorization| Select one of these choices:    | Select one of these choices:  
Delivery of services and payment authorization authorizes FM to purchase materials and services, commit labor and other FM resources to the completion of the request.  
Detailed project budgets are required for most projects and will provide clear statements of work, costs, schedules, and the project's review/approval requirements. |
| E - Approvals             | Campus policy requires approval of all project and lease requests by the appropriate Dean or Director and Vice President(s). Please forward the completed form to the appropriate person for approval prior to forwarding to Facilities Management. |
| FM Use                    | Facilities Management will use this section to assign a Work Order or Project number and unit and create a descriptive title. |