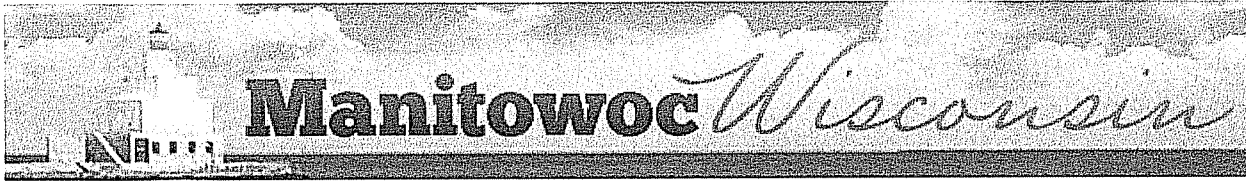


Capital Project Request Form



Request Type: ☐ Capital Request ☒ Unbudgeted

Department: Date:

Title of Request:

Department Priority

Linked to another project? ☐ Yes ☒ No

Project Request is: ☒ New ☐ Replacement ☐ Modification
Estimated Useful Life:

This is a limited field, please attach documents for more detail.

Description:

Basis of Cost: ☐ Quote ☐ Bid ☒ Estimate
Total Cost

Revenue (if any) Net Cost


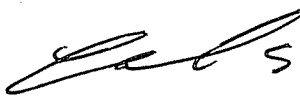

Will there be additional costs in future years to complete this project?

select one: ☐ Yes ☒ No
If yes, amount?

Finance Dept: Account Sent to Dept: ☐

Action:

Approx 0p to 2750 at unsubd
funds for Access Control System @
Korn West Museum.

A/E	N/A
	
TMB	
	
	
NWR	