



USFSP Facilities Planning & Construction

**SPACE IMPACT REQUEST**

EMAIL COMPLETED FORM TO: [edwardlewis@mail.usf.edu](mailto:edwardlewis@mail.usf.edu) FOR INFORMATION CALL: 727-873-4135

**A REQUESTOR:**  CHECK IF REQUESTOR IS PROJECT CONTACT.

COLLEGE/UNIT: \_\_\_\_\_  
 REQUEST DATE: \_\_\_\_\_  
 NAME: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

**PROJECT CONTACT:**  
 Name: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Phone: \_\_\_\_\_

RESERVED FOR SIR MANAGER USE:  
**SIR NUMBER:** \_\_\_\_\_  
 \_\_\_\_\_  
**DATE:** \_\_\_\_\_  
 \_\_\_\_\_

**B REQUEST:**  CHECK IF ADDITIONAL INFORMATION IS ATTACHED (SKETCHES, PHOTOS, PRODUCT INFO, ETC.)

**BUILDING NAME:** \_\_\_\_\_

<b>Yes</b>	<b>No</b>	<b>SPACE IMPACT QUESTIONNAIRE:</b> <input checked="" type="checkbox"/> CHECK YES OR NO FOR ALL QUESTIONS.
<input type="checkbox"/>	<input type="checkbox"/>	REQUIRES BUILDING / REMOVING WALLS OR CHANGE SPACE CONFIGURATION?
<input type="checkbox"/>	<input type="checkbox"/>	WILL OCCUPANTS BE DISPLACED WHILE WORK OCCURS?
<input type="checkbox"/>	<input type="checkbox"/>	IS AN ESTIMATE BEING REQUESTED FOR BUDGETING PURPOSES?

**EXPECTED BUDGET RANGE:**

<input type="checkbox"/>	<\$5,000
<input type="checkbox"/>	\$5,000 -- \$25,000
<input type="checkbox"/>	\$25,000 -- \$100,000
<input type="checkbox"/>	>\$100,000

**AREA IMPACTED:** \_\_\_\_\_

**DESCRIPTION OF MODIFICATION REQUESTED:** \_\_\_\_\_

**DEPARTMENT TIMELINE EXPECTATION:** \_\_\_\_\_

IN WHAT WAY IS YOUR **CURRENT SPACE** INADEQUATE FOR THE IDENTIFIED NEED? ADDRESS THE **IMPLICATIONS** TO YOUR PROGRAM/SERVICE IF YOUR REQUEST IS NOT APPROVED  
 WILL THIS PROJECT CHANGE THE **INVENTORY CLASSIFICATION OR IMPACT THE CAPACITY** OF ROOMS? (E.G. CLASSROOMS TO OFFICES; TEACHING LABS TO RESEARCH LABS)  
 \_\_\_\_\_

**C CHARTFIELD(S):** IF REQUEST IS APPROVED, IS SUFFICIENT FUNDING IN PLACE TO COVER THE PROJECT COST? IF YES, IDENTIFY FUNDING SOURCE.

OP. UNIT	FUND CODE	ACCOUNT	DEPT.	PRODUCT	INITIATIVE	BUD. REF.

**D SIGNATURE:** SIGNATURE BELOW IS REQUIRED PRIOR TO REVIEW AND DOES NOT IMPLY APPROVAL OF THIS REQUEST.

**REQUEST CATEGORY:**  CHECK ONE OF TWO CATEGORIES

<input type="checkbox"/> <b>ROUTINE:</b> ROUTINE MODIFICATION REQUIRE SIGNATURE FROM <b>DEAN OR DIRECTOR</b> OF THE DEPARTMENT. EXAMPLES OF ROUTINE MODIFICATIONS INCLUDE ADDITION OF AN ELECTRICAL OUTLET, MINOR AV PROJECTS, AND INSTALLING A NEW DOOR OR WALL IN OFFICE SPACE. <b>SIGNATURE ① REQUIRED.</b>
<input type="checkbox"/> <b>NON-ROUTINE / OTHER:</b> ALL NON-ROUTINE REQUIRES SIGNATURE FROM THE <b>DEAN OR DIRECTOR</b> AND AREA <b>VICE CHANCELLOR</b> OR DESIGNEE. EXAMPLES OF NON-ROUTINE REQUESTS INCLUDE SUITE RENOVATIONS, ALTERATIONS TO INTERIOR / EXTERIOR SPACES, CLASSROOM SPACES, AND ACCOMMODATIONS MADE DUE TO LARGE EQUIPMENT PURCHASES AND DEPARTMENTAL RESTRUCTURING. <b>SIGNATURE ① AND ② REQUIRED.</b>

**① DEAN/DIRECTOR:**

(PLEASE PRINT NAME) \_\_\_\_\_ DATE: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

**② AREA VICE CHANCELLOR OR DESIGNEE:**

(PLEASE PRINT NAME) \_\_\_\_\_ DATE: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_