



Review & Approval Req'd Prior to Initiation	
_____	_____
Administrator	Date

PROJECT INITIATION REQUEST

Date: _____

Agency _____
 Location _____
 Project Name _____
 Project Contact _____
 Authority _____
 Budget _____

Fund Source	Amount
Total	

Signature _____

Request Project Delegation? Yes No

This section to be completed by Architecture & Engineering Division

A/E Number: _____ Sub Number

A&E Design Manager _____ A&E Construction Manager _____

Consultant Selection: RFQ/Interview Informal Selection Sole Source Agency
> \$2.5M ≤ \$2.5M; Fee >\$50k Total fees <\$50k

Other: _____

Supervisory Fee: None 1% 3% 5% Document Retention: Short-Term Long-Term

Authorized Under 17-7-202: Yes No If Yes, HPBS applies.

MOU Required: Yes No MOU mandatory for non-state funds.

General Fund O&M: Yes No If No, LRBP funds 65th session & newer N/A

Project Scope & Notes