

Funding Request for Non-Routine Housing Maintenance

Instructions: After completing the upper portion of this form and securing approval from within your department, return to:

Stephanie Fikes
AVP Administration
Box 870119
Fax: 348-6968

Notification of the funding status will be sent to the requestor.

Building Where Work is to be Performed:

Description of the Work to be Performed:

Date(s) When Work is to be Performed:

Estimated Cost of Work to be Performed:

Additional Details:

Requestor's Name:

Requestor's Phone Number:

Requestor's Email:

Requestor's Box Number:

Departmental Approval:
Director: _____

(Signature)

(Date)

AVP Administration Approvals:

Budget Manager: _____

(Signature)

(Date)

Director: _____

(Signature)

(Date)

Amount Approved: \$ _____

FOAPOL to charge: _____