Center for Science Group II Equipment Substitution Request

CAL POLY

TO: Barbara Queen, Facilities Planning **DATE:** _____

SUBJECT: Substitution/Change of Approved Center for Science Group II Equipment Item

Item number being substituted for/changed (include item description and original estimated cost):

_____

Proposed (substituting or changing) item description, cost (including installation), and location:

_____

_____

Need for new item being substituted/urgency of need/ability to forego budgeted equipment:

_____

_____

Reason proposed item or change was not in original Group II list:

_____

_____

Additional modifications to building (circle one): YES NO

Note: Undersigned's Group II departmental allocation will be charged for any installation costs and any required changes to existing building systems (electrical, plumbing, HVAC).

Name: _____

Department: _____

Phone: _____ **Fax:** _____ **E-mail:** _____

Signature: _____ **Approved:** _____
Requestor/Department **Project Manager**

Approved: _____ **Approved:** _____
Johan Uyttewaal (under $20,000) **Chancellor's Office (over $20,000)**

Item number: _____ **(Note: Substitutions = new item number and "S"; changes = original number and "C")**

Mail completed form to Silas Pompa x62822 in the Facility Services department, bldg 70.