

SPACE ALLOCATION AND RENOVATION REQUEST PROCEDURES (revised May 5, 2009)

The Campus Facilities Planning Committee makes recommendations to allocate space, renovate space, and funding of renovations. The following table identifies the various approval levels.

Approvals Required for Following Circumstances			
Space Allocation		Campus Facilities Planning Committee	Other Approvals
Allocation of space is within a College or Division and there is no change in primary function of the space		no	None; however, the Associate Vice President for Finance and Support Services Planning must be notified within 30 days to update the inventory
Allocation of space is between one College or Administrative Division to another		yes	President's Cabinet
The primary function of a space is changed (e.g., converting classrooms, laboratories, residence hall rooms, and library space to some other use) regardless if there is no change in ownership		yes	President's Cabinet
Renovation – does not include routine painting or replacing carpet, does include modifying the room with new door, and reconfiguring a room with new walls, etc.			
Total cost is less than \$5,000		yes	Provost and Associate VPFSSP
Total cost is more than \$5,000 but less than \$25,000		yes	Provost and VPFSS
Total cost is more than \$25,000		yes	President's Cabinet

Process:

- Complete a Space Request Form. Attach any relevant supporting material.
- Complete plans showing the desired renovation. **NOTE: Renovations such as carpet replacement and painting do not require approval of the Facilities Committee or Cabinet unless funds are needed.**
- Obtain signature endorsements from the Chair/Director, Dean/Director/Associate or Assistant Vice President, and Provost/Vice President.
- Submit approved form with attached plans to the Associate Vice President for Finance and Support Services Planning (AVP).
- AVP forwards request and plans to the Assistant Director of Facilities Planning, Design, and Construction (OFPDC) who assigns the project to a Construction Contract Administrator who develops a preliminary budget estimate.
- OFPDC forwards the budget estimate, request, and plans to AVP for presentation to the Campus Facilities Planning Committee for review and consideration.
- Refer to the chart above for approval levels.

**TEXAS STATE UNIVERSITY-SAN MARCOS
SPACE FORM**

DIRECTIONS:

- Complete Sections A, B (if applicable) and G for all requests.
- Complete Section C for request for new space as well as Sections D, E and F if applicable.
- Complete Section D for renovation only of existing space as well as Sections E and F if applicable.
- Complete Section F for change of function of space only.

A. CONTACT INFORMATION:		
Requesting Department:	Date of Request	
Contact Name:	Contact Phone:	Contact Email:

B. IF REQUEST IS SPONSORED PROJECTS RELATED, THIS SECTION NEEDS TO BE COMPLETED:	
Principal Investigator Name:	PI Email:

C. REQUEST FOR NEW SPACE:	
Why is new/space needed and implication if allocation is not granted.	
Space will be used for: Instruction <input type="checkbox"/> Research/Lab <input type="checkbox"/> Office <input type="checkbox"/> Storage <input type="checkbox"/>	
Have you identified a suitable location for this new space that may be available? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Provide building name, room number(s). Attach drawings/floor plans. Contact Chris Reynolds, 245-2244 for assistance if needed.	
If space is currently occupied by another department, have you contacted current holder of the space provided? Yes <input type="checkbox"/> No <input type="checkbox"/> Do they support the concept? Yes <input type="checkbox"/> No <input type="checkbox"/>	
When is space needed?	
Will the current space be vacated: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain the plans for the vacated space:	
Will you need additional new/furnishings? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, itemize the furniture that will be needed:	
Complete Section D if renovation is also needed. Complete Section E regarding funding. Complete Section F if room function will be changing.	

D. REQUEST FOR RENOVATION OF NEW OR EXISTING SPACE:
Provide building name, room number(s). Attach drawings/floor plans. Contact Chris Reynolds, 245-2244 for assistance if needed.

Describe renovation needed. Address special requirements such as plumbing, electrical, etc.

Space will be used for: Instruction Research/Lab Office Storage

Will you need additional new/furnishings? Yes No

If yes, itemize the furniture that will be needed:

When does the work need to be completed?

Complete Section E regarding funding. Complete Section F if room function will be changing.

E. FUNDING INFORMATION:

What is the source of funds for the renovation? Unit College Division VP Grant Funds are needed

How much is available to commit to the project?

F. REQUEST TO CHANGE FUNCTION OF SPACE: if more than one room is involved, attach additional page(s)

Building _____
Room # _____
Current Space Use Code _____ (for help with space use codes, please contact Chris Reynolds at 245-2244)
Requested Space Use Change _____
Justification for change:

G. REQUEST AUTHORIZATION SIGNATURES (Signatures indicate agreement that the space request should be investigated.)

Department Chair or Director: _____ Date: _____

Is the College/Division Facilities Committee representative aware of this request? Yes No

Dean/Assoc or Asst VP: _____ Date: _____

Comments:

Provost/Vice President: _____ Date: _____

Comments:

Forward by e-mail or fax this completed form with the proper signatures and attachments to the Associate Vice President for Finance and Support Services Planning, mn01@txstate.edu, 245-2033 (fax)

OFFICE USE ONLY

Facilities Planning, Design, and Construction budget estimate:

Campus Facilities Planning Committee recommends approval:

Less than \$5,000 - Provost AVPFSSP

\$5,000 to \$25,000 Provost VPFSS

Over \$25,000 - President's Cabinet approves