Capital Works and Facilities

University of Western Sydney

DRAFT MINOR RELOCATION PROPOSAL FORM

Use this form when relocation:
- *involves movement within a specific site, and*
- *no change to the function of rooms, and*
- *involves only an individual or a small number of persons or rooms; and*
- *falls within space controlled by a College Dean or Director of a Unit or Entity ; and*
- *involves no associated building alterations or refurbishment; or*
- *involves minor associated building alterations or refurbishments that are fully funded by your Unit*

Proposing Unit:	Contact Person:
Email address:	Ext:
Name of Dean or Director initiating proposal (please print):	
Signature of Dean or Director initiating proposal:	Date: / /

Details and Reason for Relocation Request:	Preferred Date of Relocation:
Is any building alteration work required? Yes/No. If yes, please describe:	
Is removal required? Yes/No. If yes, list items to be moved. *(Note: Furniture is to be moved in exceptional circumstances and only with the written permission of Capital Works and Facilities)*	
Are computer changes required? Yes/No. If yes, please describe:	
Are telephone changes required? Yes/No. If yes, please describe:	
Are floor plans attached which show scope of proposal? Yes/No	

Dean/Director Comments on Proposal:

All costs associated with this relocation are to be charged to the following cost centre:

___ ___ ___ ___ ___ / ___ ___ ___ ___ ___ / ___ ___ ___ ___

Dean/Director to send form to Divisional Head for approval.

Name of approving Divisional Head (please print):	
Signature of approving Divisional Head:	Date: / /

Following sign-off by Divisional Head, fax or email this form to the Manager, Facilities Systems & Planning, Capital Works & Facilities for building fitout and/or removal assistance

Date Received by Capital Works and Facilities: / /