

St. Brendan's Facilities Commission Project Review Request Form

**Staff Person:
Request #**

Date: _____
Project Name: _____
Requested By: _____
Phone # _____
Email Address _____

Project Description: (Brief Description of the Project/Work)

Problem Description (Why is the Project Needed)

Desired Outcomes

Estimated Cost and Funding Source

Est. Annual Operating and Maintenance (O&M) Cost \$

Are Volunteers Involved? Yes No

Permits Required? Yes No Don't Know

Discussed Project w/ Parish Staff Person Yes No

TURN PAGE OVER: See Backside for Project Plan Diagram Directions

***** Please attach a plan that includes details like: specific location of work, diagram of what will be done including dimensions/sizes, color, materials, installed equipment, and any needed connections to electrical, plumbing or other utility systems.

Project Plan