**UMB SERVICE CENTER - DELEGATION REQUEST FORM**

**Date of Submission:**

**Requesting Institution:**

**Requestor Name and Contact Information:**

1. **Project:**

**Name of Project and Building:** Brief description.

1. **Project Budget & Funding details:**
2. **Background**: Information beyond description
3. **Proposed Project Delivery Method or Professional Services desired:**
4. **Project Timeline**:
5. **Delegation Request**: Please indicate what services are being requested from UMB and which services are proposed to be delegated (Note – Services typically recommended by the Service Ctr. for large capital projects are indicated with an ‘x’ in the table below)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Services |  | Required for the project | Services Requesting Delegation |
| 1 | Procurement Services: |  |  |  |
| 2 | Project Management: |  |  |  |
| 3 | Architectural Design Review Services: |  |  |  |
| 4 | Mechanical Design Review Services: |  |  |  |
| 5 | Electrical Design Review Services: |  |  |  |
| 6 | Onsite Inspection Services: |  |  |  |
| 7 | Commissioning Services: |  |  |  |
| 8 | Other (Please specify): |  |  |  |

7. **Reasons for Delegation Request**: Please provide detailed reasoning for delegation request for each applicable service below:

1. Procurement Services:
2. Project Management:
3. Architectural Design Review Services:
4. Mechanical Design Review Services:
5. Electrical Design Review Services:
6. Onsite Inspection Services:
7. Commissioning Services:

**To:** Anna Borgerding, Associate Vice President of Facilities and Operations – Service Ctr. Director.

**CC:** Jack Mumma, Executive Director of Construction Procurement

**CC:** Jody Latimer, Executive Director of Design and Construction