

REQUEST FOR ALLOCATION OF SPACE
CAPITAL AND SPACE PLANNING OFFICE

Request # (Number to be assigned by CASPO)
Date received by CASPO
Date approved by CASPO

<input type="checkbox"/> New Leased Space <input type="checkbox"/> On-Campus space	Date of Request
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Please complete this form as fully as possible to facilitate the timely review and implementation of your request.

CONTACT INFORMATION

Name of program, research or unit needing space			
Department		School/College	
Requester or Principal Investigator			
Request Contact Person		Title	Email Address
Address		Campus Box No.	Phone

SPACE INFORMATION

Number of occupants	Square feet requested	<input type="checkbox"/> ASF Please provide Assignable Square Feet (ASF) for on-campus space, or Rentable Square Feet (RSF) when requesting leased space. For a description of these terms and help in estimating your space needs, please refer to: http://www.washington.edu/admin/reo/departments/ <input type="checkbox"/> RSF
Primary type of space <input type="checkbox"/> Office <input type="checkbox"/> Lab <input type="checkbox"/> Clinic <input type="checkbox"/> Classroom <input type="checkbox"/> Residence <input type="checkbox"/> Storage <input type="checkbox"/> Other (specify) _____		

Describe the space being requested (include number, type and size of rooms, configuration, and any special requirements).

Reason for space <input type="checkbox"/> New program/research <input type="checkbox"/> Expansion of existing <input type="checkbox"/> Relocation of existing	Desired occupancy date (mm/dd/yyyy)	Desired term of lease/occupancy (months or years)
Desired location or address (if known)		

This space will be used for (Check all that apply)

Research related activity Medical or dental clinic or other health care related uses (including hospital or clinic support functions) Animal treatment, care or housing

Testing, analysis, research or instruction that involves the use of (Check all that apply)

Chemicals, biological agents, recombinant DNA, x-ray, or non-ionizing radiation or lasers, pressure vessels, unusual electrical, or other health hazards Volatile radioactive materials, radioactive gasses or select agents requiring specific security standards

This space will (Check all that apply)

Require fume hoods, biological safety cabinets or similar equipment designed to control contaminants Include an industrial shop, paint spray booth or other equipment containing refrigerants Produce or store hazardous waste or materials

Additional notes, special program needs or conditions

FUNDING INFORMATION

All costs associated with this space including rent, operating expenses, tenant improvements, furniture, telecommunications and move costs are the responsibility of the occupying program, unit, department or school/college unless arrangements are made with CASPO for use of central funds. Please refer to the UW Real Estate Office web page for assistance in estimating costs associated with leased space: <http://www.washington.edu/admin/reo/departments/>

Fund source(s) or funding agency:			Grant or contract expiration date (mm/dd/yyyy)	Is grant subject to Off-Campus Recovery Rate?
Budget Name	Budget Number(s)	Share of cost(%)		
1.				<input type="checkbox"/> Yes <input type="checkbox"/> No
2.				<input type="checkbox"/> Yes <input type="checkbox"/> No
3.				<input type="checkbox"/> Yes <input type="checkbox"/> No
4.				<input type="checkbox"/> Yes <input type="checkbox"/> No
5.				<input type="checkbox"/> Yes <input type="checkbox"/> No
6.				<input type="checkbox"/> Yes <input type="checkbox"/> No
7.				<input type="checkbox"/> Yes <input type="checkbox"/> No
8.				<input type="checkbox"/> Yes <input type="checkbox"/> No

APPROVAL INFORMATION

REQUESTOR Unit Head/Principal Investigator	PRINT NAME _____ Signature _____ Date _____
DEPARTMENT Department Chair or Director	PRINT NAME _____ Signature _____ Date _____
SCHOOL OR COLLEGE Dean/VP (or authorized designee)	PRINT NAME _____ Signature _____ Date _____

Comments or Conditions of Approval

Questions? For assistance in using this form, and for more information on the space request process, please refer to the information on page 3, or contact the Capital and Space Planning Office. Call 206-543-6277, or email spacereq@u.washington.edu

Return this completed form to: Capital and Space Planning Office, Box 359445

INFORMATION ON THE SPACE REQUEST PROCESS

UNIVERSITY OF WASHINGTON
CAPITAL AND SPACE PLANNING OFFICE

Requester:

The requester submits a completed Request for Allocation of Space form to the Capital and Space Planning Office, Box 359445, Seattle, Washington 98195. This form may be obtained from the CASPO website at:

<http://www.washington.edu/admin/pb/home/pdf/space-request.pdf>

Adobe Reader is required to open this file. You may either print the form to enter the information by hand, or complete the form on-screen. Adobe Acrobat software is required to save the completed form.

Please complete the form as fully as possible to facilitate the timely review and implementation of your request. It is the requester's responsibility to obtain the appropriate Department and School or College approvals before sending the completed request form to CASPO. The completed form may be routed and approved via email and forwarded to CASPO at spacereq@u.washington.edu

CASPO:

The Capital and Space Planning Office (CASPO) assists the Provost in space allocation, planning and budgeting, which includes the responsibility to review and evaluate requests for leased space based on University procedures and guidelines. The director or staff may contact you for more information in response to your request. After this review is completed you will receive a letter or email informing you of the decision regarding your request for space.

Due to the very limited availability of on-campus space, such requests may take a considerable amount of time to resolve (to the extent they can be met at all). Approval for allocation of on-campus space will usually come in the form of a Space Assignment Letter issued by the Provost.

Requests for leased space are generally approved by CASPO as long as they have been approved by the appropriate Chair/Director (Department) and the Dean/VP (School/College), and a viable fund source for lease payments has been provided. Approval to lease space will be sent to the Dean/VP and the requester along with notification to the Real Estate Office so they may proceed on your behalf to seek and secure suitable space.

Requests to acquire large amounts of space off-campus for instructional use may require further review by the Washington State Higher Education Coordinating Board (HECB). If such review is required, CASPO will submit to them the necessary information. Generally, leases for non-instructional purposes, research, and health services related functions do not require HECB review.

REO:

After a request for leased space is approved by CASPO, the Real Estate Office (REO) will contact you with information on the leasing process, and will assist you in locating appropriate facilities to suit your needs and budget.

The Real Estate Office negotiates and reviews all leases. Please do not initiate contact with brokers and/or landlords without their assistance. REO will provide a draft copy of the lease for your comment and approval of the business terms. Lease forms must be approved by the Office of the Attorney General and executed by the Director of Real Estate on behalf of the University of Washington Board of Regents.

The Real Estate Office will pay rent to the landlord and recharge the budget number(s) indicated on the space request form, or other budget(s) as directed by the party responsible for funding.

If your request involves the use or storage of certain chemicals, agents, materials or equipment, the department of Environmental Health and Safety (EH&S) will be involved in the review of the proposed location. EH&S will provide guidelines to ensure the health and safety of UW employees working in the space.

Questions? Call the Capital and Space Planning Office (CASPO) at 206-543-6277, or send email to: spacereq@u.washington.edu