

# PROJECT START-UP

<b>BCAD OFFICE USE ONLY</b>		<b>INSTRUCTIONS: COLLEGE PROJECT MANAGERS to fill-out and submit</b> this form to: <a href="mailto:bcamparscone@cgasolutions.com">bcamparscone@cgasolutions.com</a> with any new Building Code Administration (BCAD) services for project start-up. For further assistance call <b>954.766.2717</b> .	
MEP File No. Date Rcvd:			
<b>BC Project #:</b>		<b>Project Name:</b>	
COST CENTER: <input type="checkbox"/> <b>EXISTING PO: Enter BCAD PO#:</b> _____		<input type="checkbox"/> <b>NEW PO (Request Cost)</b>	
<b>1. BC Proj. Mgr:</b>		Mobile:	Email:
<b>2. Campus:</b> <input type="checkbox"/> North <input type="checkbox"/> Central <input type="checkbox"/> South <input type="checkbox"/> DTC <input type="checkbox"/> Cypress <input type="checkbox"/> Coral Springs <input type="checkbox"/> Miramar <input type="checkbox"/> Other:			
<b>3. Proposed Work:</b> <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alter <input type="checkbox"/> Maint. <input type="checkbox"/> Demolition <input type="checkbox"/> Other Scope of Work: _____			
<b>4. Est. Cost \$</b>		<b>Est. Sq Ft.</b>	
<b>5. Contracting Firm:</b>			or <input type="checkbox"/> TBD
Contact:	Phone:	Email:	
<b>6. Architect / Engineer:</b>			or <input type="checkbox"/> TBD
Contact:	Phone:	Email:	
<b>7. Project Distribution List:</b> (Include names/email addresses for any parties to be included in addition to the emails provided above):          Add additional sheets as necessary			