

UNIVERSITY OF MISSOURI CELLULAR PROJECT REQUEST FORM

PROJECT QUESTIONS	PROJECT REQUESTOR TO FILL OUT THIS SECTION
DATE:	
CELLULAR COMPANY:	
MU LEASE AGREEMENT:	
AUTHORIZED AGENT NAME:	
AUTHORIZED AGENT EMAIL:	

	NEW CELLULAR SITE ADDITION/MODIFICATION OF EXISTING SITE IDENTICAL REPLACEMENT OF EQUIPMENT
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PROJECT CONSTRUCTION COST ESTIMATE	
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PROJECT EXPECTED CONSTRUCTION DURATION	
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PROJECT DESCRIPTION:	
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DOES THE PROJECT SCOPE RESULT IN AN INCREASED WEIGHT OF EQUIPMENT?

YES
 NO
 INCREASED WEIGHT AMOUNT:

DOES THE INSTALLATION OF THE PROJECT REQUIRE A CRANE? IF YES, WHAT IS THE HEAVIEST LIFT?	YES NO WEIGHT OF HEAVIEST: LIFT
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WILL ROOF PROTECTION BE IN PLACE FOR