

PAINT REQUEST

Location of Paint Request - Building and Room Number: _____

Dates/times accessible to paint: _____

PLEASE CHECK AS APPROPRIATE:

Reason for painting – check one only:

Color Change

Normal wear and tear

This room is a – check all that apply:

classroom

office

suite of rooms

lab

reception

single room within a suite

The walls are:

brick

plaster

cinderblock

drywall

GENERAL GUIDELINES:

Color selections are made from an institutional color palette containing a broad array of choices. Paint requests cannot be considered for rooms painted within the previous 10 years.

There must be at least four feet of space between any wall and the room furnishings for reasonable access to wall surfaces. It is possible to move furniture to paint the walls, however, smaller spaces may need to be entirely emptied prior to painting. Furniture moves will be coordinated by Facilities Operations. The requestor must box all loose items.

If new carpeting is anticipated, the paint request should be submitted at least eight (8) weeks prior to the carpet installation date. If this is not possible, painting may not occur until after the carpet installation.

Department: _____

Date: _____

Contact Person: _____

Phone # _____

Any special concerns: _____

Please fax this form to Facilities Operations at ext. 5118 and we will contact you.

For Facilities Operations Use Only:

Color Selected: _____ Date Scheduled: _____

Paint WO# FO-_____ Shop: _____ Mover WO # FO-_____