

NOVATO UNIFIED SCHOOL DISTRICT

**FACILITIES IMPROVEMENT REQUEST FORM**

Per Board Policy 7112.1(a)

**DISTRICT APPROVAL REQUIRED PRIOR TO COMMENCEMENT OF WORK**

School: \_\_\_\_\_

Specific Location: \_\_\_\_\_

Description of Work (or Donation):  
\_\_\_\_\_  
\_\_\_\_\_

Specifications:  
\_\_\_\_\_  
\_\_\_\_\_

Scale Drawings Attached:       Yes       No

Installation Start Date: \_\_\_\_\_

Desired Completion Date: \_\_\_\_\_

Pre-Inspection:       Yes       No      Date: \_\_\_\_\_

Periodic Inspection:       Yes       No      Frequency: \_\_\_\_\_

Final Inspection:       Yes       No      Signed: \_\_\_\_\_

Would district assistance be required?       Yes       No

If "YES", explain: \_\_\_\_\_

CONTACT PERSON(S)	DAY PHONE	EVENING PHONE	EMAIL ADDRESS

Required Approval:

\_\_\_\_\_  
Site Administrator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Facilities / Director of MOT Signature

\_\_\_\_\_  
Date

**PLEASE NOTE:**

Organizations are responsible for all required compensation for district support services outside normal business hours.

Dependent of the nature and scope of work, liability coverage may be required.