\* Please complete as much information as possible to facilitate proper review of your request. For questions regarding this form and/or the RELLIS PDRB review process, please contact [PDRB@rellis.tamus.edu](mailto:PDRB@rellis.tamus.edu).

|  |  |
| --- | --- |
| **Date of Request:** |  |
| **Requesting Party Name:** |  |
| **System Member Affiliation:** |  |

|  |  |
| --- | --- |
| **SSC/FPC Project No. (if any):** |  |
| **Project Name/Title:** |  |
| **Proposed Project Location:** |  |

|  |  |  |
| --- | --- | --- |
| **Request Type (mark all that apply):** |  | Site Approval / Land Reservation / Land Use Change |
|  | Construction or Renovation Project Review (SD) |
|  | Construction or Renovation Project Review (DD) |
|  | Exterior Building Modification |
|  | Campus Hardscape / Softscape Modification |
|  | Signage |
|  | Campus Utility or Infrastructure Modification |
|  | Other |

|  |  |
| --- | --- |
| **Dates of Prior PDRB Review and Action (if any):** |  |
| **Current Project Status and Schedule:** |  |

|  |
| --- |
| **Project Description:** |
|  |
| \* Please attach supporting graphic(s) and/or visuals to include as applicable: site plans, photographs, sketches, model studies, floor plans, exterior elevations, perspectives, renderings, material/finish samples, etc. |

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| --- |
| **Describe the relationship of the project to the surrounding campus, adjacent sites and other nearby RELLIS Campus Stakeholders:** |
|  |
| **Explain how the proposed project conforms to and supports the RELLIS Campus Master Plan (i.e. land use, pedestrian and vehicular circulation, architectural character, etc.):** |
|  |
| **Describe any potential impacts to existing campus utility infrastructure (if known) or required upgrades to campus utility infrastructure:** |
|  |
| **Describe any environmental health and safety issues related to the project (i.e. fire and life safety, hazardous materials, regulatory requirements, other general risks, etc.):** |
|  |
| **Describe any related logistical issues (i.e. laydown areas, project timing, other campus impacts, etc.). If the project is temporary in nature, describe plans for removal and restoration of affected campus areas upon project termination.** |
|  |

I respectfully request review and consideration of the request detailed above and as indicated in the attached supporting documentation.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| **Name and Title** |  | **System Member** |  | **Signature** |  | **Date** |

**SYSTEM MEMBER EXECUTIVE LEADERSHIP SUPPORT/APPROVAL:**

(Required for all initial requests and/or land reservations)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| **Name and Title** |  | **System Member** |  | **Signature** |  | **Date** |