

PRECONSTRUCTION AGREEMENT

Physical Plant

DATE: _____

PROJECT NAME: _____ PROJECT NUMBER: _____

PROJECT MANAGER: _____ PHONE: _____ EMAIL: _____

CONTRACTOR: _____ CONTRACTOR PHONE: _____

PROJECT DETAILS: _____

CONSTRUCTION START DATE: _____

ESTIMATED COMPLETION DATE: _____

IMPACTS TO UTILITIES AND SERVICES

- ☐ POWER ➞ Expected outage(s) and duration: _____
- ☐ HVAC ➞ Expected outage(s) and duration: _____
- ☐ WATER ➞ Expected outage(s) and duration: _____
- ☐ IT/DATA ➞ Expected outage(s) and duration: _____
- ☐ OTHER ➞ Expected outage(s) and duration: _____

ADDITIONAL NOTES:

	SIGNATURE	PRINTED NAME	DATE
Customer* (required)			
Contractor* (required)			
Project Manager* (required)			
Other			

**Signature gives approval of these conditions and authorizes the commencement of construction services described within the scope of work and timelines for project.*