

**CAPITAL PROJECT MANAGEMENT DEPARTMENT
PROJECT PROPOSALS – CHECK-OFF LIST
EQUIPMENT REQUIREMENTS**

It shall be the policy of the "Capital Project Management Department (CPMD) to utilize the following "Check-Off List" for review and acceptance of project proposals.

LOCATION: _____ DATE: _____

PERSON ASSIGN TO: _____

Please check of documents that were received.

- Application for Services
- Written Documentation - of need by the Facilities Inventory which documents the need for replacement, renovation or repairs.
- Appropriate Chapter Resolution and/or NN Oversight Committee Resolution - that indicates the need and priority of the proposal project, subject to the local Land-Use Plan.
- Preventive Maintenance Plan and Operating Cost Plan
- Cost Estimate:
 - A. Architect & Engineering (A/E) Cost
 - B. Construction Cost
- Written commitments and encumbrance: of other source(s) of funding.
- Letters of Support: From AGENCIES and ENTITIES that affirm the emergency situation or need, enrollment statistics, and justification for square footage.
- Documentation of the Clearances: Archaeological, Environmental Assessments and Land Withdrawals.

Project Quality Assurance/Quality Control Acknowledgement

Complete Incomplete

Project Name: _____ Project Type: _____

The undersigned have read and concur with this Project Folder is complete with all necessary PPA's and is in adherence to the Capital Project Management Department Policies and Procedures and Gaming Fund Distribution and Policies and Allocations:

Project Manager

Date

CPMD Department Manager