

BUILDING CHANGE REQUEST
STATE PRESERVATION BOARD

SPB use only

SPB File No. _____ Work Order No. _____

REQUEST

Agency: ☐ Governor ☐ Senate ☐ House ☐ SOS ☐ SAO ☐ TLC ☐ SAC
☐ LBB ☐ SPB ☐ DPS ☐ LRL ☐ Sterling Bistro ☐ TEC ☐ DIR
☐ Other (specify) _____

Date of Request Member Room Number or Location Telephone / Fax Number

Requested By Position or Title Email Address Attachments: ☐ Yes ☐ No

Briefly describe the requested change and the reason for the change:

***Agency Approval** _____ Or _____ Or _____ Date _____
 Patsy Spaw Charlie Geren Head of Agency (checked above)
☐ Request Reviewed ☐ Request Denied

REVIEW *(to be completed by SPB)*

Reviewer Signature ☐ Request Reviewed ☐ Request Reviewed with Modifications

Date ☐ Request Denied
Modification: _____

ESTIMATE COST *(to be completed by SPB)*

Estimated Cost Estimate Provided By Date of Estimate

APPROVAL AND ACCEPTANCE OF COST *(required prior to start of requested work)*

Agency: _____ Source of funds _____

Or _____ Or _____
Member **Authorized Member's Staff** **Authorized Agency Signature**
Date _____

***FINAL APPROVAL** _____

***REQUIRED SIGNATURES** Bob Cash, SPB Director of Facilities Date