

To: Director of Purchasing/Procurement (FFT&E)

New Jersey Schools Development Authority REQUEST FOR END USER TECHNOLOGY

(Form and attachments must be submitted ten (10) months prior to substantial completion date)

Date:	Submitted by:		Approved by:
SDA Managed	Construction Operations Program Officer		Construction Operations Regional Director
Project Name / District:			
School Address: (Street, City, State & Zip Code)			
DOE: Project Number: (i.e. 0000-000-00-0000-00)			
Package Number: (i.e. DK-0000)			
Targeted Technology Delivery Date:			
School Opening Date:			
District Technology Contact Name:			
District Technology Contact E	mail Address:		
District Technology Contact P	hone Number:		
School Contact Name:			
School Contact Email Address:			
School Contact Phone Number	::		
Architect Firm Name & Conta	ct Name:		
Architect Email Address:			
Architect Phone Number:			
SDA/CM Firm Name & Contact Name:			
SDA/CM Contact Email Address:			
SDA/CM Contact Phone Number:			
(For FFT&E Use Only)			
Budget Amount:			
Integrator Firm Name:			
Integrator Contact Name:			
Integrator Contact Email Address:	:		
Integrator Phone Number:			
Program Operations must su 2 sets of scale layouts of furn 1 set of Riser Diagrams (Hard 1 set of Electrical Drawings (1 set of Data/Telecommunical Approved IT Plan (Hard copy) 1 set of the Final Technology 1 copy of Final Technology S 1 IT Questionnaire	niture and architectural pland copy) (Hard copy) ation Plans (Hard copy) by) y Specification (Div. 6000)		
Form acknowledged by:			Date: