



LINDA M. HODGDON  
Commissioner

**THE STATE OF NEW HAMPSHIRE  
DEPARTMENT OF ADMINISTRATIVE SERVICES**

**BUREAU OF PUBLIC WORKS DESIGN & CONSTRUCTION**

**PROJECT WORK REQUEST/AUTHORIZATION FORM**

**Date:**

**Agency:**

**To:** Mary Kibbee-Lee, Business Administrator III  
Email: [mkibbee-lee@dot.state.nh.us](mailto:mkibbee-lee@dot.state.nh.us)

**From:**

**Project Name:**

**Project Contact:**  
(Person with authority for funding and decisions)

**Project Address:**

**Tel. No:**

**Town/City:**

**Email:**

**Project Description:** Include needs, major issues (such as hazardous materials), other special requirements (such as night/weekend work, grant conditions, prevailing wages, etc.). Use 2<sup>nd</sup> word document sheet if needed.

**Project Schedule: Est. Start Date:**

**Est. Completion Date:**

**Services Requested:** (BPW charges apply to all non-general fund projects per RSA 21-I:85).  
(The BPW will determine if a consultant is required. A consultant scope and fee will be reviewed with the Project Contact).

Design:  Bidding:  Construction Administration:  Other:

**Funding for Project: (Amount, Appropriation and Type of Funds)**

Acctg. Unit	Agency	Co.	Object	Amount	Gen. %	Fed. %	Hwy. %	Other %	Lapse Date
				\$					
				\$					
				\$					
				\$					
				\$					

**\*\*\*\*If multiple funding sources, indicate order of use\*\*\*\***

Submission of this form certifies that the funding amount and source stated can be encumbered by the Bureau of Public Works and these funds are dedicated to this project.

**FOR BPW USE ONLY**

Approved:

Assigned To:

Date:

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<http://admin.state.nh.us/purchasing/PublicWorks/PWindex.asp>