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| 2019-25 Six-Year Facilities Plan  Agency Desired Plan - Basic Project Summary  (For projects with action dates on or after July 1, 2021) | | |
|  | | |
| **CONTACT INFORMATION** | | |
| **Agency Name:** | **Agency Number:** | **Contact Person:** |

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| **PROJECT INFORMATION** | | | |
| **Project Title (example: Relocation of Agency X Headquarters):** | | | |
| **Current location UFI number(s):** | | **Primary Space Type:** | |
| **Project Type:** |  | **Proposed Action Date:** |  |
| **Proposed City/County:** | | **Estimated Rentable Square Feet:** | |
| **Estimated Workspace Count:** | | **Estimated Users Count:** | |
| **Estimated Ongoing Cost:** | | **Estimated One-Time Cost:** | |
| **Project Specific Notes:** | | | |

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| --- | --- |
| **PROJECT BUSINESS NEED** | |
| **Describe the circumstances that created the need for this facilities project.** | |