



ROM REQUEST

Current Date
Department Requesting
Initiator
Project Sponsor**
Dean/Vice President Signature
Sr Vice/Provost/President Signature

OFFICIAL USE ONLY
ROM NUMBER
PROJECT COORDINATOR
BUILDING CODE
DATE ROM RETURNED

(Required before submission to Facilities Operations)

FY2027 ROM REQUEST ROM ESTIMATE (Estimate to help identify needed funds)

Please select category to the best of your ability

- Asset Addition, Classroom/Laboratory Refresh, Faculty Start-up, Program Enhancement, Asset Preservation, Compliance/Regulatory, Health/Safety, Revenue Initiative

WORK DESCRIPTION: BUILDING NAME (if applicable):
SPACE CODE/LOCATION (if applicable):

Include as much detail as possible such as specs, quotes, etc.

**Project Sponsor: Identifies, defines, acquires funding for and makes a business case for project. Stays in direct contact with Project Manager to ensure project is completed on time and within budget.

This is a rough order of magnitude (ROM) estimate to be used for budgetary purposes only. Firm estimates will be obtained upon Capital funding approval by Board. Upon approval of funds a Work Order form must be submitted (form found at www.fit.edu/facilities/). ALL forms must be submitted to projects@fit.edu.

Office Use

Involvement:

Facilities \$ IT \$ None \$ (other costs)

TOTAL ROM PROJECT COST \$

Florida Institute of Technology • Facilities Operations