

Capital Projects Quick Guide

CPB Agency Project Request

(FMD-450-1010)

DRAFT



Capital Projects Bureau
Facility Management Division
General Services Department



NEW MEXICO
GENERAL SERVICES DEPARTMENT

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Agency Project Request (SA/TL)

All CPB Capital Projects with the possible exception of a Declaration of Emergency, have their genesis with an Agency Project Request (APR). No work shall be commenced without the completion of an APR. This Directive along with the APR shall be distributed to all potential requesting Agencies to assure compliance. The APR is intended to be distributed and completed electronically as a Fillable PDF Form.

The latest APR along with this Directive is available for download at:

<https://www.generalservices.state.nm.us/facilitiesmanagement/capital-projects.aspx>

The CPB will update the APR from time to time as current policies dictate.

APR Components (SA/TL)

The APR consists of two parts:

- I. Requesting Agency Information
- II. CBP Agency Project Request Action

I. Requesting Agency Information (Requesting Agency)

The current Part I - Requesting Agent Information is shown here:

I. REQUESTING AGENCY INFORMATION

A. GENERAL INFORMATION

Agency: Contact: Date:
 Phone: Email:

B. PROPOSED PROJECT INFORMATION

Proposed Title: Project Contact:
 Address: Agency Priority:
 Funding Source(s): Project Budget: Completion:

Preliminary Project Scope:

Additional Information and/ or Attachments:

C. CERTIFICATION AND SIGNATURE

Requesting Agency Certification:

I certify that this request is accurate and complete and is in compliance with State of New Mexico Space Standards, including all laws and executive orders. Agency is requesting consideration from the CPB to complete this Project. I understand that the CPB will review this request and respond to the Requesting Agency as quickly as possible with the Request Disposition below.

Signature: Date:

Name: Title:

APR PART I - REQUESTING AGENCY INFORMATION

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A. General Information (Requesting Agency)

Part A information is self-explanatory and all fields are required.

B. Proposed Project Information (Requesting Agency)

Salient fields of Part B information is explained as follows; other fields are self-explanatory. All fields are mandatory except for "Additional Information and/ or Attachments".

Project Contact (Requesting Agency)

Anticipated requesting agency Project Contact

Agency Priority (Requesting Agency)

Requesting Agency's proposed Project priority form 1 (highest) to 3(lowest). This priority will not necessarily translate to the CPB Project priority.

ICIP Citation

Cite the ICIP reference for the proposed Project. If none, so indicate.

Completion Date (Requesting Agency)

Provide estimated proposed Project completion date. If unknown so state.

Funding Source(s) (Requesting Agency)

Provide proposed Project funding source or sources. If unknown so state.

Project Budget (Requesting Agency)

Provide estimated Project budget. If unknown so state.

Preliminary Project Scope (Requesting Agency)

Provide a preliminary Project scope outlining Requesting Agency's expectations.

Additional Information and/ or Attachments (Requesting Agency)

Provide any additional Project information and attach any relevant additional preliminary documentation.

C. Certification and Signature (Requesting Agency)

Part C information is self-explanatory and all fields are required.

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II. CBP Agency Project Request Action (SA/TL)

The current Part II - CBP Agency Project Request Action is shown here:

II. CPB AGENCY PROJECT REQUEST ACTION

Request: Approved Denied Requires Re-submittal Amended Referred AIM CP#:

Funding Source(s): CPB Project Manager:

Project Priority: Tentative Budget:

Contract Type: Procurement Type:

Property ID(s): CP Program(s):

Statute Authority:

Comments and/or Attachments:

CPB Signature: Date:

CPB Name: Title:

APR PART II – CPB AGENCY PROJECT REQUEST ACTION

Either the Staff Architect and /or the Project Manager Team lead shall be responsible for completing Part II in a timely manner. Part II of the APR reflects the final action taken by the CPB and supersedes any information provided in Part I, Requesting Agency Information, regarding the requested Project.

Request (SA/TL)

The Request check boxes reflect the action taken by the CPB and will result in one of the following actions:

- Approved – APR is approved as noted
- Denied – APR is denied as noted
- Requires Re-submittal - APR required re-submittal as noted
- Amended – Original APR is amended as noted
- Referred – Referred as noted in comments

AIM CP# (SA/TL/KB)

Regardless of the APR Action taken by the CPB, an AiM Capital Project will be created reflecting an appropriate Project Status. If the Project is not to go forward, either the Staff Architect of Project Manager team Lead shall be listed as the Project Manager. This will assure that a record of all APRs shall be recorded in AiM.

The AiM Capital Project shall be created by the Staff Architect, Project Manager Team Lead or KB in accordance with appropriate Policies or Directives.

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AIM CP# (SA/TL/KB)

Enter AiM Program Number if appropriate.

Funding Source(s) (KB/DT)

Funding sources as determined by the CPB in accordance with appropriate Policies or Directives.

CPB Project Manager (SA/TL)

The CPB Project Manager as assigned by the Staff Architect or Project Manager Team Lead in accordance with appropriate Policies or Directives.

Project Priority (SA/TL)

CPB Project Priority from 1 (highest) to 3 (lowest) shall be assigned by the Staff Architect or Project Manager Team Lead in accordance with appropriate Policies or Directives.

Tentative Budget (SA/TL)

The tentative Project Budget as assigned by the Staff Architect or Project Manager Team Lead in accordance with appropriate Policies or Directives.

Contract Type (SA/TL)

The anticipated Project Contract Type as assigned by the Staff Architect or Project Manager Team Lead in accordance with appropriate Policies or Directives.

Procurement Type (SA/TL)

The anticipated Project Procurement Type as assigned by the Staff Architect or Project Manager Team Lead in accordance with appropriate Policies or Directives.

Comments and/or Attachments (SA/TL)

Any additional Project information or relevant additional preliminary documentation

PB Signature/ Name/ Date & Title (SA/TL)

Self-explanatory information.

Related Directives (FMD Director)

- FMD-450-1020 – Project Priority (Pending)
- FMD-450-1040 – PC Project Initiation (Pending)
- FMD-450-1070 – Capital Program (Pending)
- FMD-450-1090 – Capital Project (Pending)

Directive Training (TL)

Go-to Meeting sessions with CPB staff and Requesting Agencies.

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Appendix 1 – Current APR Form

AGENCY PROJECT REQUEST
Proposed Capital Project
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I. REQUESTING AGENCY INFORMATION

A. GENERAL INFORMATION

Agency: Contact: Date:
Phone: Email:

B. PROPOSED PROJECT INFORMATION

Proposed Title: Project Contact:
Address: Agency Priority:
Funding Source(s): Project Budget: Completion:
Preliminary Project Scope:

Additional Information and/or Attachments:

C. CERTIFICATION AND SIGNATURE

Requesting Agency Certification:
I certify that this request is accurate and complete and is in compliance with State of New Mexico Space Standards, including all laws and executive orders. Agency is requesting consideration from the CPB to complete this Project. I understand that the CPB will review this request and respond to the Requesting Agency as quickly as possible with the Request Disposition below.

Signature: Date:
Name: Title:

II. CPB AGENCY PROJECT REQUEST ACTION

Request: Approved Denied Requires Re-submittal Amended Referred AiM CP#:

Funding Source(s): CPB Project Manager:
Project Priority: Tentative Budget:
Contract Type: Procurement Type:
Property ID(s): CP Program(s):
Statute Authority:
Comments and/or Attachments:
CPB Signature: Date:
CPB Name: Title:

Requesting Agency - Complete sections 1, 2 & 3 and send to jim.lindeman@state.nm.us or martin.kuziel@state.nm.us
Emergency - Very Highest Priority Priority 1-3 --> 1 Highest; 3 Lowest
CPB will complete Section 4 and advise of Request Status as soon as possible
If approved, the CPB Project Manager will contact you with next steps
For additional information, contact Jim Lindeman @ (505) 470-8329 or Martin Kuziel @ (505) 795-0116

Distribution: Requesting Agency
AiM Related Documents
Project Manager
Staff Architect

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CPB Agency Project Request Approval

Handwritten signature of James L. Lindeman in black ink.

James L. Lindeman, Team Lead, Capital Projects Bureau

4 July 2020

Date

Handwritten signature of Martin Kuziel in black ink.

Martin Kuziel, Staff Architect, Capital Projects Bureau

17 Aug 2020

Date

Handwritten signature of Dale Morrison in blue ink.

Dale Morrison, Deputy Director, Facilities Management Division

17 Aug 2020

Date

Handwritten signature of Peter J. Barrington in blue ink.

Peter Barrington, Deputy Director, Facilities Management Division

17 Aug 2020

Date

Handwritten signature of Anna Silva in blue ink.

Anna Silva, Director, Facilities Management Division

17 Aug 2020

Date