**PROJECT SIGNAGE REQUEST\***

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| **Project Manager** |  |
| **Phone** |  |
| **Email** |  |

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| Project Name |  |
| Project Number |  |
| Project Location (Building/Floor/Area) |  |
| Project Square Footage |  |
| Floor Plan Attached (Yes/No) |  |
| Scope of Work (Brief Description) |  |
| Department Contact (Email/Phone) |  |
| EH&S or Radiation Safety Contacts |  |
| Wayfinding / Directory (Needed) |  |
| Departmental Sign (with Logo?) |  |
| Estimated Signage Budget (Include breakdown by department if applicable.) |  |
| Department’s Current Location (Building/Floor/Area) |  |
| Estimated Punch Date |  |
| Move-In Date |  |

**\*Email request to** [**SignShop@bjc.org**](mailto:SignShop@bjc.org)

**Questions? Call 362-1843.**