



Facilities Management
Design & Construction

Deviation Request Number: _____

DEVIATION REQUEST FORM

This form shall be used by Design Professional to request a deviation from the Design Standards & Procedures and must be completed prior to bid document phase. Please complete and return via email to the UI Project Manager in .pdf format.

Date: _____ Project Phase: _____
(SD, DD, CD)

UI Project Name: _____

UI Project Number: _____ Owner's Design Project Manager: _____

Design Professional: _____

Design Professional Representative: _____
(first and last name)

Email Address: _____ Phone: _____

Design Standards Edition: July 31, 2020 Section Number: Appendices Page Number: 472

Description of Deviation: (attach additional page(s) as needed)

Day-Brite FSS440L840 to be basis of design lighting fixture for UI project (Pharmaceutical Sciences Research Building, renovating existing office room S428 to IT Room).

Justification for Deviation Request: (attach additional page(s) as needed)

Owner (IT – George Stumpf and Chris Hatland) are wanting to update the light fixture inside IT rooms

Attachment List: Total number of pages attached: 0

Reviewed / Approved By:

(Responses NA – not applicable, R&A – reviewed & approved, RAN – reviewed as noted, R&R – revise & resubmit, NR – not recommended):

<p>1) FIMS</p> <p>(Department Name) DocuSigned by: R&A Response <u>Kirk Banks</u> Kirk Banks (Printed Name & Initial) <u>1/21/2020</u></p>	<p>2) UI Public Safety</p> <p>(Department Name) DocuSigned by: NA Response <u>David Visin</u> David Visin (Printed Name & Initial) <u>1/21/2020</u></p>	<p>3) UI Utility</p> <p>(Department Name) DocuSigned by: R&A Response <u>Ben Fish</u> Ben Fish (Printed Name & Initial) <u>1/21/2020</u></p>	<p>4) ITS</p> <p>(Department Name) DocuSigned by: Approve Response <u>George Stumpf</u> George Stumpf (Printed Name & Initial) <u>1/21/2020</u></p>
<p>5) B&LS</p> <p>(Department Name) DocuSigned by: Response <u>Julie Sychra</u> Julie Sychra (Printed Name & Initial) <u>1/4/2021</u></p>	<p>6)</p> <p>(Department Name) Response _____ (Printed Name & Initial) _____</p>	<p>7)</p> <p>(Department Name) Response _____ (Printed Name & Initial) _____</p>	<p>8)</p> <p>(Department Name) Response _____ (Printed Name & Initial) _____</p>

(B&LS, UIU (Ben Fish), Public Safety and FIMS required for all main campus deviations. Capital Management, Engineering Services required for all UIHC deviations. Include all other departments/stakeholders impacted: P&T, ITS, Campus Planning, Safety & Security, HCIS, etc.)

DocuSigned by:
Chet Wieland
1/4/2021