



Virginia Department of Planning and Budget
Project Request Justification

_____ Biennium

Date: _____

A. General Information

1. Agency Name: _____ 2. Agency Code: _____
3. Project Title: _____ 4. Agency Priority: _____
5. Name of Person to Contact about this Form: _____
6. Contact Person's Telephone Number: _____
7. Contact Person's E-mail Address: _____

B. Proposed Project

1. Description (include project size, capacity, and purpose):

2. In approved Master Site Plan: Yes No
If not, explain:

3. In current Strategic Plan: Yes No
If not, explain:

C. Project Justification

1. Programmatic:

2. Existing facilities:

D. Options Considered (include as an option delaying this project until future biennia)

E. Project Scope Changes:

F. Project Cost Changes:

G. Project Schedule Changes:
