Virginia Department of Planning and Budget

Project Request Justification

Biennium: ___________________________ Date: ___________________________

A. General Information
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: