

SUBMIT FORM TO:
constructionpurchasing@columbia.edu

Rush Request

Please attach any additional relevant backup to the email

Requester Dept. <input type="checkbox"/> CUMC <input type="checkbox"/> CUFO <input type="checkbox"/> MDG <input type="checkbox"/> LDEO <input type="checkbox"/> FPO <input type="checkbox"/> Purch <input type="checkbox"/> Other _____		
Requestor's Name: _____		
Title: _____	Email: _____	
Date: _____	Uni: _____	Tel: _____
Type of Request: <input type="checkbox"/> Landlord Required <input type="checkbox"/> Proprietary <input type="checkbox"/> Safety <input type="checkbox"/> Specialized Skill _____ <input type="checkbox"/> Urgent Repair <input type="checkbox"/> Violation Related _____		
<input type="checkbox"/> Need Additional Suppliers in Trade (select one) <input type="checkbox"/> Architect/Engineer <input type="checkbox"/> Carpentry <input type="checkbox"/> Cleaning Svc. <input type="checkbox"/> Construction Manager <input type="checkbox"/> Debris Removal <input type="checkbox"/> Doors & Windows <input type="checkbox"/> Electrical <input type="checkbox"/> Elevators <input type="checkbox"/> Environmental <input type="checkbox"/> Equipment <input type="checkbox"/> Exteriors <input type="checkbox"/> Flooring <input type="checkbox"/> Furnishings <input type="checkbox"/> General Contractor <input type="checkbox"/> Mechanical <input type="checkbox"/> Painting <input type="checkbox"/> Pest Control <input type="checkbox"/> Plumbing <input type="checkbox"/> Site <input type="checkbox"/> Telecommunications <input type="checkbox"/> Other: _____	<input type="checkbox"/> Supplier Recommendation/Solicitation Company Name: _____ _____ Contact Name: _____ Phone: _____ Email: _____ Address: _____ City: _____ State: _____ Zip: _____	
Resource Description (typical scope of work to be executed): 		
Bargaining Agreement: <input type="checkbox"/> Union <input type="checkbox"/> Non-Union	Resource Affiliation: <input type="checkbox"/> M/WBE <input type="checkbox"/> LBE	
Bonding Required: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: \$ _____	Required Licence(s) _____	
Proposed Supplier Utilization: <input type="checkbox"/> Project Specific <input type="checkbox"/> Service Agreement <input type="checkbox"/> Task Order <input type="checkbox"/> Term Agreement		
Ability to accept Projects/Assignments between \$ _____ and \$ _____.		
For Purchasing Use Only: Date received _____ Review Completed on _____		
NOTES: 		