DPI DESIGN REVIEW – TRANSMITTAL   Date _____

Submit all materials electronically in PDF Format --- teri.williams@dpi.nc.gov
      Provide 3 separate PDF files --- Drawings / Specs / Transmittal Form
      Check One --- First Submittal __   Re-Submittal __
      Funding Source(s) --- Check all that Apply
      ESSER Funding   K-12 Athletic Facility Grant   Local Funding   PSBCF   NBPSCF   PSBRRF
      Include Transmittal Form with each submittal.   Complete entire form.   Indicate N/A in fields that do not apply.

Project Information

Public School Unit [LEA / CHARTER / OTHER] _____ PSU # _____

    School Name _____ SCH # _____

    Previous School Name _____

    School Address _____

    Grades Served _____   Student Capacity _____   Core Capacity _____

Project Description _____

_____

    Design Phase [SD / DD / CD] _____

    New Area [SF] _____   Renovated Area [SF] _____

    Demolished Area [SF] _____   Site Area [ACRES] _____

    Code Jurisdiction _____

    Project Delivery Method [DBB / CM@R / PPP] _____

    Expected Bid Date _____

    Expected Construction Start Date _____

    Expected Occupancy Date _____

Construction Budget _____

Demolition of Existing Buildings [Y / N] _____   Does this project replace an existing school? [Y / N] _____

    Which School? _____

    Has the required Feasibility and Cost Analysis been submitted? [Y / N] _____

    Plans for disposition of existing school _____

Is this project based on a Prototype Design? [Y / N] _____

    Original Prototype School Name and Location _____

    List changes made to original prototype design _____

High Performance Building Features / Special Building Systems / Design Features _____

_____

Notable Programmatic Features _____

_____

Contact Information

Lead Design Firm

Firm Name	
Discipline	
Address	
City / State / Zip	
Firm Email	
Firm Website	
Telephone	

Design Team

Discipline	*Firm*	*Contact Name*	*Telephone*	*Email*
Architectural				
Civil				
Landscape				
Structural				
Plumbing				
Mechanical				
Electrical				

Public School Unit

Title*	*Name*	*Telephone*	*Email*

* PSU Administrative Leader is required – e.g., Superintendent, Director, CEO, Headmaster, etc.
* Include additional PSU contacts when appropriate – e.g., Facility Director, Assistant Superintendent, Principal, Maintenance Director, Program Manager, etc.

Rev. 03/2022