CDD	DADT	
	DARI	1

Department:	

Space Planning Request

Department of Treasury, DPM&C Office of Planning, Programming & Budgeting

Certifications & Approvals

DPMC USE ONLY SPR No.:	Municipal Code:
------------------------	-----------------

REQUESTIN	G AGENCY	
I hereby certify that all information contained within this doc represents the minimum square footage necessary for this comply with DPMC's Policy for Hazardous Materials/Waste that if any of the above statement made by me is false I an NJAC 17:11-32)	agency to carry out its functions and that e Remediation for State-Leased Facilities.	this agency will I am aware
Organization/Unit:	<del></del>	
Signature	Date	
Division:		
Signature	Date	
<u> </u>	<del></del>	
Department:		
Signature	Date	
Chief Fiscal Officer:		
Signature	Date	_
<u> </u>	<u> </u>	
ON	IB	
I hereby certify that I have reviewed the current and p associated with this request:	rojected employee position data and fu	unding
Budget Analyst:		
Signa	ture	Date
Deputy Director of Budget & Accounting:		
Signa		Date
DPM&C D	RECTOR	
Approved		
Disapproved		
 Signa	ture	Date

Revised 09/01/10 Page 1 of 4

### **SPR PART 1**

Date:	
<u>ORGANIZATION</u>	CURRENT LOCATION
Department:	Address:
Division:	
Unit:	Approximate Sq. Ft.
Type of Operation (Please Check One)  Administrative   Client Service   Check Box if Request for  Renewal Option	Check appropriate box State Owned
FUNDING SOURCE (attach additional sheets if necessary)  ACCOUNT # C/D %  OMB Comments:	Existing SPR:  SPR#  Current FTE:  Approved Additional FTE: (Documented approval by governor's office) Other Non-FTE Staff (Consultants,Interns,Part-time,etc.)  Total (Current + Addn1 FTE's +Other)  AGENCY CONTACT  Name:  Phone #:
	Email:
Will this Space Planning Request result in the vacant If yes, provide explanation as to why space is being	NO □ YES □
(Attach additional	al sheets if necessary)

Revised 09/01/10 Page 2 of 4

### **SPR PART 1**

Employee Status Report – Current FTE  Duplicate form as necessary to include all positions					
Code* & Shift	Job Title	Field/ Office (F/O)	NAME or ALLOWABLE HIRE	Position No.	BLDG. Code

<sup>\*</sup>Enter Position Space Type Code shown in SPR Part 3, Section A

Revised 09/01/10 Page 3 of 4

### **SPR PART 1**

Vacant Position Status Report – Additional Approved FTE & Other  Duplicate form as necessary to include all positions, including part-time/consultants/interns, etc				
Job Title	Field/ Office (F/O)	Info on proposed funding source	Position No.	BLDG. Code
	Duplicate form as necessary	Duplicate form as necessary to include Field/ Job Title Office	Duplicate form as necessary to include all positions, including part-ti  Field/ Job Title Office Info on proposed funding source	Duplicate form as necessary to include all positions, including part-time/consultants    Field

<sup>\*</sup>Enter Position SpaceType Code shown in SPR Part 3, Section A.

Revised 09/01/10 Page 4 of 4