



Delegated Signatory Form

By default, final approval can only be provided by the Dean's Office of the requesting School or College. If you would like to delegate signatory authority for project approval, please provide the name and contact information of the person authorized to approve design and construction documents, as well as approve project funding.

Designated Signature Authority:

Name of signatory authority: _____ **School/College/Division:** _____

Email: _____ **Phone:** _____

The Dean's Office may delegate signatory authority at three different levels – at the project level, at the facility manager level, or at the department/school/college level.

Please initial the line for the type of authority you wish to delegate to the designated signatory authority.

Level of Signatory Authority:

_____ **Project Specific Authority:** Delegate signatory authority for all parts of a project. _____
Project Name and Number

_____ **Building Authority (All Projects):** Delegate signatory authority for all projects requested by a specific facility manager. _____
Facility Manager Name

_____ **Department/School/College (All Projects):** Delegate signatory authority for all projects requested by the School or College. _____
Department/School/College Name

Approvals:

I/We the undersigned authorize _____ to act as the signatory representative for design and funding approval related to small projects and renovations.

Dean/Director Approval: _____ **Approval Date:** ____/____/____

College Representative Approval: _____ **Approval Date:** ____/____/____

Designated Authority Signature: _____ **Approval Date:** ____/____/____

Delegated Signatory Authority can be revoked at any point by the Dean's Office. Notice of revocation must be submitted to the Physical Plant Campus Renovation Services via email: crsadmin@lists.wisc.edu

For additional information and links refer to: <http://physicalplant.wisc.edu/campus-renovation-services.htm>