

Space Planning Request Form



Please complete and return along with any relative documents/sketches

Date Submitted: _____ Date Requested: _____ # of Offices/Areas _____
Dealer Name: _____ OED Representative: _____
Contact Name: _____ Dealer City/State: _____
Project Name: _____ Contact Phone: _____
Is this a bid? Y N GSA State Contract Expect Install Date _____

Please write in which series you are specifying for each manufacturer for your project:

Allseating _____	Indiana Furniture _____
Artopex _____ <small>Please fill out Artopex space plan form</small>	Magnuson Group _____
Berco _____	Maxon _____ <small>Please fill out Maxon space plan form</small>
CCN _____	Safco _____
Egan _____	Woodstock _____
ESI _____	

Casegoods

Layout: U-Shape L-Shape Straight
Finish Material: _____ Pull Style: _____ Edge Style: _____
Storage: BBF FF Lateral Multi-File Hutch Bookcase Storage Cabinet Other: _____
Accessories: Tackboards Tasklights Keyboard Tray Monitor Arm Other: _____
Grommet Locations: _____ Power: _____

Seating

Task: Chair Function: _____ Arm Style: _____ Add. Features: _____ Fabric Grade: _____
Guest: Arms Y N Finish _____ Fabric Grade _____
Lounge: Single Love Seat Sofa Fabric Grade _____

Tables

Conference: Finish Material _____ Base Style _____ Edge _____ Power _____
Training: Finish Material _____ Leg Style _____ Edge _____ Power _____
Occasional: Finish Material _____

Reminders:

Please include Cad File, if available

Please include drawing sketch / typical

Are specials required Y N , if yes, please indicate details: _____

Notes:
