

## REQUEST FOR CITY PROJECT NUMBER

Date: \_\_\_\_\_

Project Type: A/E ☐ AHBA ☐ CIP ☐ SUR ☐ ABCWUA ☐

IS THIS A PHASE OF AN EXISTING PROJECT: YES ☐ NO ☐

IF YES, EXISTING PROJECT NUMBER: \_\_\_\_\_

NAME OF PROJECT:

ADDRESS OF PROJECT:

**NOTE:** Include a vicinity map of the project location!!!

MAP NO.:

DESCRIPTION OF PROPOSED WORK:

PROJECT MANAGER/PHONE NUMBER:

REQUESTED BY:

Name	Phone No.	Fax No.
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- All CIP Project requests must come from the Project Manager. All PWC (On-call Construction) requests must come from the appointed representative from Construction Management Division, Department of Municipal Development.
- Email to the Master Scheduler @ [mortiz@cabq.gov](mailto:mortiz@cabq.gov). You will receive your assigned City Project Number within 24 hours via email. THANK YOU

YOUR PROJECT NUMBER IS: \_\_\_\_\_

Master Scheduler  
Monica Ortiz  
Planning Dept./Design Review  
Tel No. 924-3975  
[mortiz@cabq.gov](mailto:mortiz@cabq.gov)