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9/26/17

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MTSU Clean Energy Initiative Project Funding Request

There are five (5) sections of the request to complete before submitting. See <http://www.mtsu.edu/~sga/cleanenergy.shtml> for funding guidelines. Save completed form and email to cee@mtsu.edu or mail to MTSU Box 57.

1. General Information	
Name of Person Submitting Request Nicholas Lenczycki	
Department/Office Aerospace	Phone # (Office) 615-217-6314
MTSU Box # 0067	Phone # (Cell) 904-233-6966
E-mail Nicholas.Lenczycki@mtsu.edu	Submittal Date 09/26/2017

2. Project Categories (Select One)	
Select the category that best describes the project.	
<input checked="" type="checkbox"/> Energy Conservation/Efficiency	<input type="checkbox"/> Sustainable Design
<input type="checkbox"/> Alternative Fuels	<input type="checkbox"/> Other
<input type="checkbox"/> Renewable Energy	

3. Project Information	
a. Please provide a brief descriptive title for the project.	
b. The project cost estimate is the expected cost of the project to be considered by the committee for approval, which may differ from the total project cost in the case of matching funding opportunities. Any funding request is a 'not-to-exceed' amount. Any proposed expenditure above the requested amount will require a resubmission.	
c. List the source of project cost estimates.	
d. Provide a brief explanation in response to question regarding previous funding.	
3a. Project Title Installation of hydration station in FEC	
3b. Project Cost Estimate \$5,312	
3c. Source of Estimate MTSU Special Project Estimate	
3d. If previous funding from this source was awarded, explain how this request differs? N/A	

4. Project Description

(Completed in as much detail as possible.)

- a. The scope of the work to be accomplished is a detailed description of project activities.
- b. The benefit statement describes the advantages of the project as relates to the selected project category.
- c. The location of the project includes the name of the building, department, and/or specific location of where the project will be conducted on campus.
- d. List any departments you anticipate to be involved. Were any departments consulted in preparation of this request? Who? A listing may be attached to this form when submitted.
- e. Provide specific information on anticipated student involvement or benefit.
- f. Provide information for anticipated future operating and/or maintenance requirements occurring as a result of the proposed project.
- g. Provide any additional comments or information that may be pertinent to approval of the project funding request.

4a. Scope: Work to be accomplished

Installation of a hydration station (with bottle fill capability) in the Flight Education Center (FEC). The hydration stations will need to be installed where the existing water fountains are located in the hallway near the restroom area of the FEC. The estimate includes removal of existing inadequate water fountain and drywall repair.

4b. Scope: Benefit Statement

This request would replace an all but useless water fountain in the existing location. Students and instructors complete labs outside, frequently when temperatures are in the 90s. Without an adequate means of hydration, students and instructors are at risk of heat-stress and heat-stroke.

- Current aerospace students assigned to flight labs (~150 students daily)
- Current instructor staff (~40 student instructors)
- Current faculty and full-time staff (~15 employees)
- Prospective students and families on airport visits (hundreds of visitors annually, including high school visits and summer camps)

4. Project Description (continued)
<p>4c. Location of Project (Building, etc.)</p> <p>Installation of a hydration station (with bottle fill capability) in the Jean A. Jack Flight Education Center (FEC). The hydration stations will need to be installed where the existing water fountains are located in the hallway near the restroom area of the FEC.</p>
<p>4d. Participants and Roles</p> <p>Aerospace Department - This project has the support of the Aerospace Department's Department Head.</p> <p>Facilities - An SP-2 has been completed (SP180023) and an estimate provided (see attached).</p>
<p>4e. Student participation and/or student benefit</p> <p>There is no student participation expected with this project.</p> <p>Students within the aerospace department, prospective student, and employees would benefit greatly from an operable and modern hydration station. With the ability to refill water bottles, students and instructors would be able to bring fluids to remain hydrated on flights (many of which last several hours) in high temperatures.</p>
<p>4f. Future Operating and/or Maintenance Requirements</p> <p>Water filter replacement</p>
<p>4g. Additional Comments or Information Pertinent to the Proposed Project</p> <p>There is no vending machines in the FEC. The only source of fluids is the nearly inoperable existing water fountains.</p>

5. Project Performance Information

Provide information if applicable.

- a. Provide information on estimated annual energy savings stated in units such as kW, kWh, Btu, gallons, etc.
- b. Provide information on estimated annual energy cost savings in monetary terms.
- c. Provide information on any annual operating or other cost savings in monetary terms. Be specific.
- d. Provide information about any matching or supplementary funding opportunities that are available. Identify all sources and explain.

5a. Estimated Annual Energy Savings (Estimated in kW, kWh, Btu, etc.)

N/A

5b. Annual Energy COST Savings (\$)

N/A

5c. Annual Operating or Other Cost Savings. Specify. (\$)

Negligible

5d. Matching or Supplementary Funding (Identify and Explain)

None

SPECIAL PROJECTS Form 2
Preliminary Estimate for Project Approval and Funding

To: Nicholas Lenczycki	Date: 09.20.2017
From: Lisa Wells	Intl: <i>LBW</i>
Project Name: FEC Hallway – Drinking Fountain	TAF#
Description: Replace drinking fountain with bottle-filler fountain	
Cost to provide and install bottle-filler drinking fountain in hallway. Project includes removing existing and repair/patch of drywall.	
Note: Pricing valid until 10.20.17. Thank you!	
Construction/Renovation:	\$ 5,312.71
Information Technology:	\$
‡ Total Amount Approved:	\$ 5,312.71

Approval:

Signature Requirements: (2) Minimum, **Department Head and Dean**. If request results in the change in lay-out or function of a space, the **Vice President's** signature is required. All account numbers which begin with anything other than a 2 or 3 must be approved by the **Business Office**.

Account Number: _____

Department Head: _____

Dean: _____

Provost: _____

Vice President: _____

ITD: _____

Business Office: _____

Please return the completed form to Construction/Renovation by Fax 898-2298 or Mail to Box 32 for project implementation.

Building Name: Jean A. Jack Flight Education Center Building ID#: P0090

Special Project #: SP180023 Date: 09-20-2017

‡All construction cost estimates are preliminary only; actual cost of construction may vary.
‡The ITD portion of this estimate was provided by ITD; C & R cannot be held accountable for equipment overages.