PROJECT REQUEST AND
NUMBER ASSIGNMENT FORM

Please answer all questions, be complete and specific with responses. Send completed form to the City of Topeka Engineering Division, 620 S.E. Madison, 2nd Floor, Topeka, Kansas 66607. Incomplete forms will be returned for additional information.

REQUESTING AGENCY: ________________________________________________________________

CONTACT PERSON: ________________________________________________________________

SCOPE OF PROJECT: (Be specific)

SOURCE OF FUNDS: (Check one)

☐ Developer Financed Project
☐ KSA 12-6a Petition Project (City)
☐ KSA 12-6a Petition Project (County)
☐ KSA 12-6a Hybrid Project (City)
☐ Other: ________________________________________________________________

ESTIMATED CONSTRUCTION COST: ____________________________________________________
(Note: Petition projects shall include a detailed Engineer’s Estimate of Probable Construction Cost.)

TARGET CONSTRUCTION START DATE: _________________________________________________

DEVELOPER INFORMATION:

Name: ____________________________
Address: _________________________
Phone No. _________________________

PARTY RESPONSIBLE FOR PAYMENT (if not Developer):

Name: ____________________________
Address: _________________________
Phone No. _________________________

SUPPLEMENTAL INFORMATION: (Any work done previously, project location, etc.)

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Project Request and Number Assignment is hereby approved:

_________________________________________             _________________
Brian Faust, City Engineer                     Date

Project Number: ___________________________  Project Engineer: ___________________________