

**Facility Services**
**INTERIOR SIGNAGE REQUEST**
**Date of Request:** \_\_\_\_\_

**Requesting Faculty/Department:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Ext.** \_\_\_\_\_

**Building Location for Sign:** \_\_\_\_\_

**Floor:** \_\_\_\_\_ **Room Number:** \_\_\_\_\_

Type of Sign	Quantity	Sign to Read
5"x 2" Room Number		
10"x 2" Occupant Nameplate with STAX Holder (door or wall mount)		
STAX Holder ONLY		
10"x 2" Occupant Nameplate with Desktop Holder		
10"x1-3/4" Occupant Nameplate ONLY		
16"x5" Room Identification		
Interior Wayfinding Board (Listing Departments or Rooms with arrows)		
Internal Building Directory		
Special (must be approved by Facility Services)		

**Services Requested** (Please check where applicable)

Budget Estimate

Construction/Implementation

**Expected Completion Date:** \_\_\_\_\_

**APPROVALS:**
**Administrative/Department Head:** \_\_\_\_\_

**FUNDING APPROVALS:**
**Full Account Numbers(s) funds will be sourced from:** \_\_\_\_\_

**Approved Budget:** \$ \_\_\_\_\_

**Administrative/Department Head:** \_\_\_\_\_

**Submit Form To:** Debbie Unholzer (E-Mail: debu@uwindsor.ca)

If there are any questions while filling out the form, please contact Debbie at ext. 2852