UC DAVIS HEALTH | Facilities Planning and Development Division

REQUEST FOR
STATEMENTS OF QUALIFICATIONS
FOR

DESIGN PROFESSIONAL SERVICES
CAPITAL INFRASTRUCTURE PROJECTS

NOVEMBER 12, 2026

UC DAVIS HEALTH
FACILITIES PLANNING & DEVELOPMENT
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Consultant Statement of Qualifications Form
EDPA Agreement Sample

BACKGROUND:

UC Davis Health (UCDH) is a nationally recognized academic healthcare organization dedicated to excellence in patient care, education, research, and public service. UCDH includes the School of Medicine, Betty Irene Moore School of Nursing, a 645-bed Level I Trauma Center and acute care hospital, a National Cancer Institute-designated Comprehensive Cancer Center, the MIND Institute, and outpatient healthcare facilities throughout the Sacramento region.

UC Davis Health's Facilities Planning and Development (FP&D) division oversees a diverse Capital Improvement Program comprising approximately 500 active initiatives valued at $5 billion. Within FP&D, the Capital Infrastructure Team manages projects involving infrastructure modernization, building system replacements, deferred maintenance, facility renovations, information technology, security, building automation, and critical healthcare systems. These projects frequently occur in occupied facilities requiring complex phasing, multidisciplinary coordination, regulatory compliance, and continuity of essential healthcare operations.

FP&D seeks qualified firms to provide professional design services for HCAI and Non-HCAI projects, including traditional and collaborative delivery methods such as Design-Build and Progressive Design-Build. Services may range from preliminary investigations, programming, and criteria development through design, permitting, construction administration, and project closeout.

This Request for Qualifications (RFQ) establishes the scope of services, qualification requirements, and selection criteria for firms supporting the Capital Infrastructure Team in delivering safe, reliable, efficient, and maintainable facilities.

The selected firm(s) will be expected to sign an Executive Design Professional Agreement with a 3-year duration and a maximum fee based on the Work Scope (see pages 5-10) for the provision of all services. Depending on the number and scope of the renovation projects that are requested by FP&D, all or part of the maximum fee amount may be expended. Fees for individual projects or groups of projects will be negotiated as the projects are initiated. The University intends to select up to four (4) architectural firms, one firm for each scope of work. A firm may apply for and may be awarded multiple scopes.

PROFESSIONAL SERVICES REQUESTED:

The University seeks qualified firms to provide professional planning, design, engineering coordination, procurement, construction administration and closeout services for HCAI and Non-HCAI capital projects. Assignments may include infrastructure renewal, building systems, technology, security, patient safety and complex multiphase work in occupied healthcare and institutional facilities.

Basic Services and Project Delivery

Services may include investigations, feasibility and existing-condition assessments; stakeholder programming and Owner's Project Requirements (OPR); schematic design, design development, construction documents and specifications; permitting; bid/award assistance; RFIs, submittals, site observations, change order review, record documents, commissioning support and closeout. Assignments may also include performance criteria, bridging documents, Progressive Design-Build support, design-to-budget, constructability, schedule and risk alignment. Firms shall serve

as Architect of Record (AOR) for authorized traditional design work when required; criteria/bridging assignments shall separately define the owner-advisory role and Design-Builder's design responsibilities.

Subconsultants and Design Quality

Project-specific subconsultants may include mechanical, electrical, plumbing, structural, civil, landscape, fire alarm/sprinkler, IT, security, clinical systems, building automation, controls and commissioning specialists; services and teams will be negotiated and authorized after firm selection. Prime firms shall coordinate all disciplines and provide integrated drawings, calculations and specifications. A documented QA/QC program shall include independent technical and interdisciplinary milestone reviews, code/constructability checks and resolved comment logs. The University prefers coordinated fire alarm, fire sprinkler and related documents in initial HCAI submissions where permitted, minimizing deferred approvals.

Infrastructure, IT and Operational Continuity

Projects may address central plants, utilities, HVAC, power and emergency systems, medical gases, fire/life safety, BMS/BAS and monitoring, fiber/cabling, CCTV, access control, nurse call, patient monitoring, infant protection (HUGS-type), patient wandering prevention and real-time location systems. Designs shall consider capacity, resilience, interoperability, cybersecurity/privacy and lifecycle operation. Occupied-facility work shall address phasing, enabling work, temporary services, planned shutdowns and cutovers, rollback plans, infection control, air/dust containment, noise/vibration, interim life safety and uninterrupted critical operations in coordination with University operational and clinical stakeholders.

Regulatory Compliance, Commissioning and Closeout

Firms shall identify the authority having jurisdiction and coordinate applicable California codes, accessibility, energy, seismic and University standards. HCAI assignments may require plan review, permits, inspections, Inspector of Record coordination, post-approval changes and agency closeout; Non-HCAI assignments shall follow applicable University/local review processes. Include appropriate testing, system integration, alarm/failover verification, staff training, O&M manuals, warranties, asset data and operational turnover.

Project Range, Selection and Authorization

Projects may range from $50,000 to $30 million, individually or in aggregate. The University anticipates selecting one firm for each of five Work Scope categories and may award multiple categories to one firm. Firms shall identify the categories sought and demonstrate relevant licensure, staffing, experience and capacity. Refer to Form and Content of SOQs (Page 5) and Screening Criteria (Page 7). Services and subconsultants require written, project-specific authorization; no minimum volume is guaranteed.
The categories of work are as follows:

WORK SCOPE 1
Criteria Document Development for Design-Build or Collaborative Contract Model
Maximum Agreement Value: $2,000,000

The University seeks qualified architectural firms to provide Criteria Architect and related consulting services for Design-Build (DB), Progressive Design-Build (PDB), and other collaborative delivery projects within its Capital Projects Program. Assignments may involve new construction, renovation, modernization, infrastructure renewal, and complex multiphase projects in occupied healthcare, academic, research, and support facilities. The firm shall establish and document the University's project requirements, design intent, technical criteria, and operational expectations while preserving appropriate design flexibility for the delivery team.

Core Responsibilities

• Owner's Project Requirements and Criteria Development: Develop and maintain Owner's Project Requirements (OPR), functional programs, space and room requirements, concept diagrams, bridging documents, performance specifications, University standards, and measurable acceptance criteria. Validate requirements with clinical, facilities, and other stakeholders.

• Existing Conditions and Infrastructure Verification: Assess available record information, facility conditions, utility capacity, system interfaces, and deferred-maintenance constraints; identify field investigations, assumptions, gaps, and risks requiring verification before final scope and pricing.

• Multiphase Planning and Operational Continuity: Define phasing, enabling work, temporary services, swing space, relocations, utility outages, and system cutovers. Incorporate infection prevention, interim life safety, access, security, emergency operations, and protection of active clinical services.

• Regulatory and Multidisciplinary Coordination: Establish applicable building code, accessibility, fire/life safety, sustainability, licensing, and HCAI criteria. Coordinate architectural, structural, mechanical, electrical, plumbing, technology, medical equipment, and specialty-system performance requirements.

• Collaborative Procurement and PDB Preconstruction: Support technical RFQ/RFP materials, proposer evaluations, and collaborative workshops; participate in scope validation, design-to-budget, constructability and value analysis, risk allocation, cost reconciliation, milestone planning, and development of the agreed scope, schedule, and commercial baseline.

• Design Validation and Change Control: Review submissions and alternatives against approved criteria; maintain compliance matrices and decision/deviation logs; identify scope gaps and technical risks; evaluate substitutions and changes for effects on performance, operational needs, lifecycle cost, and University standards.

• Commissioning and Operational Readiness: Define testing, commissioning, training, documentation, warranty, phased turnover, and operational acceptance requirements; support construction-phase criteria reviews and final verification when authorized.

• Professional Independence and Accountability: Represent the University's technical interests, disclose and manage potential conflicts of interest, and distinguish advisory and criteria-review services from the Design-Builder's and Architect/Engineer of Record's design, quality control, and

statutory responsibilities.

Required Firm Qualifications

Firms shall demonstrate substantial owner-side criteria/bridging experience—not solely Architect of Record services—on DB/PDB or comparable collaborative projects; healthcare and HCAI experience; complex occupied-facility phasing; multidisciplinary coordination; and effective stakeholder facilitation. Teams shall include appropriately California-licensed professionals, suitable specialty consultants, and capacity to support concurrent assignments.

Deliverables, Outcomes, and Authorization

Project-specific deliverables may include the OPR, criteria and bridging packages, existing-conditions assessments, phasing plans, technical procurement exhibits, compliance/deviation registers, risk and decision logs, and commissioning/acceptance criteria. The objective is clear, enforceable, performance-based requirements that improve cost and schedule reliability, reduce ambiguity, protect operations, and support long-term maintainability. Work will be assigned only by University-approved, project-specific written authorization, within the $2,000,000 maximum agreement value.

WORK SCOPE 2
Infrastructure and Building Systems Design Services for Non-HCAI Projects
Maximum Agreement Value: $2,000,000

The University seeks qualified architectural and multidisciplinary engineering firms to provide planning, investigation, design, permitting, procurement, and construction administration for infrastructure renewal and building systems projects under the jurisdiction of the UCDH Building Department or applicable local authority (non-HCAI). Assignments may include research, academic and support facilities, emphasizing reliability, maintainability, system resilience, and uninterrupted critical operations.

Core Responsibilities

• Infrastructure Programming and Design: Define Owner's Project Requirements (OPR), basis of design, capacity, redundancy, performance and maintainability criteria; prepare feasibility studies and schematic design (SD), design development (DD), and construction documents (CD) for renovation, replacement and expansion of existing systems.

• Existing Systems Assessment: Verify records and field conditions; evaluate age, condition, remaining service life, capacity, deficiencies and interdependencies; identify utility tie-ins, access limitations, hazardous materials and investigative testing needs. Coordinate specialty engineering and appropriate survey services.

• Building Systems and Utilities: Coordinate architectural support and civil, structural, mechanical, electrical, plumbing, fire/life safety and controls design, including central plant interfaces, HVAC, domestic/process water, drainage, electrical distribution, emergency power, building automation, communications and related equipment.

• Operational Continuity and Phasing: Develop enabling work, temporary service, redundancy, bypass, isolation, shutdown, cutover and rollback strategies; coordinate with Plant Operations

and Maintenance, Utilities, IT, EH&S and affected occupants. Address infection control, dust, air quality, noise, vibration, access and interim life safety.

• Code, Permitting and Project Controls: Coordinate applicable California codes, energy requirements, accessibility, fire/life safety, University standards and non-HCAI permits. Support constructability, design-to-budget, milestone estimating, cost reconciliation, long-lead procurement, risk assessment and outage scheduling.

• Technical Documents and Specifications: Prepare coordinated calculations, equipment schedules, one-line diagrams, flow diagrams, control sequences, demolition and tie-in details, CSI-organized specifications, testing criteria and editable CAD/BIM files consistent with University standards.

• Document QA/QC: Implement a documented, project-specific QA/QC plan with independent discipline and interdisciplinary checks at SD, DD, CD and permit/bid milestones. Verify calculations, code compliance, equipment sizing, drawings/specifications, control interfaces, shutdown plans and constructability; track and close review comments before submission.

• Procurement and Construction Administration: Support bidding and addenda; evaluate RFIs, submittals, substitutions and changes; conduct periodic observations and system interface coordination; assist with deficiency resolution, shutdown readiness, commissioning and field verification. Preserve the design professional's contractual responsibilities.

• Testing, Commissioning and Turnover: Define factory/site acceptance testing, TAB and functional performance testing as applicable; witness or review critical system tests, cutovers and integrated operations; support training, O&M manuals, asset registers, warranties, record documents and phased turnover.

Professional Standard and Qualifications

Services shall meet the ordinary professional standard of care. Firms shall demonstrate California-licensed architectural and engineering leadership, strong MEP/infrastructure design experience, building-system replacement in occupied facilities, commissioning and controls integration, non-HCAI permitting, utility outage planning, and formal independent document QA/QC. The Architect/Engineer of Record and consultants remain responsible for their professional services.

Deliverables and Authorization

Task-order deliverables may include OPR and basis-of-design reports; condition/capacity assessments; system options and lifecycle evaluations; SD/DD/CD and permit packages; calculations, specifications and control sequences; phasing/shutdown plans; QA/QC checklists and resolution logs; estimates and schedules; construction administration records; testing/commissioning documentation; and closeout materials. All work requires written University authorization within the $2,000,000 maximum agreement value.

WORK SCOPE 3
Infrastructure and Building Systems Design Services for HCAI-Regulated Projects
Maximum Agreement Value: $2,000,000

The University seeks qualified architectural and multidisciplinary engineering firms to provide

comprehensive planning, investigation, design, HCAI approval coordination, procurement support, and construction administration for infrastructure and building-system projects within facilities subject to California Department of Health Care Access and Information (HCAI) jurisdiction. Assignments may include central plant and utility improvements, HVAC and ventilation, medical gas, plumbing, electrical distribution, emergency/essential power, fire/life safety, building automation, and related seismic and architectural work in occupied healthcare facilities. Services shall maintain clinical operations, regulatory compliance, system reliability, and lifecycle performance.

Core Responsibilities

• Infrastructure Programming and Design: Establish Owner's Project Requirements (OPR), basis of design, system capacity, resilience, redundancy, maintainability and performance criteria; develop feasibility studies, schematic design (SD), design development (DD), and coordinated construction documents (CD).

• Existing Conditions and System Assessment: Validate available records through appropriate field verification; assess system age, condition, capacity, deficiencies, interdependencies, seismic constraints, tie-in points, access limitations and required investigations or testing.

• Multidisciplinary Systems Engineering: Coordinate architectural, structural, civil, mechanical, electrical, plumbing, fire/life safety, controls and specialty consultants; address equipment replacement, structural support, seismic anchorage/bracing, control sequences, utility connections and integration with existing infrastructure.

• HCAI Codes, Approvals and Compliance: Establish applicable California healthcare building, fire/life safety, accessibility, energy and seismic requirements; prepare HCAI-ready documents and supporting calculations; coordinate with HCAI reviewers, respond to plan-check comments, and manage required revised, deferred and post-approval documents, as applicable.

• Occupied Healthcare Phasing and Shutdowns: Develop enabling work, temporary services, bypasses, isolation, redundancy, shutdown/cutover and contingency plans; coordinate with Plant Operations and Maintenance, clinical stakeholders, EH&S, Utilities, IT and other departments. Address ICRA, air/dust containment, noise, vibration, interim life safety, temporary power, access and continuity of patient care.

• Technical Deliverables and QA/QC: Prepare coordinated calculations, diagrams, equipment schedules, control narratives, demolition/tie-in details, CSI-formatted specifications and University-required CAD/BIM files. Implement independent discipline and interdisciplinary reviews at design and permit milestones; maintain QA/QC checklists, comment logs and documented resolution before submission.

• Cost, Schedule, Procurement and Construction Administration: Support milestone estimates, design-to-budget, lifecycle/value analysis, constructability, outage scheduling, long-lead procurement, bidding and addenda. Review RFIs, submittals, substitutions and proposed changes; provide site observations and coordinate design professional responses and HCAI construction-phase documentation.

• HCAI Construction Verification and Turnover: Coordinate as applicable with the Inspector of Record (IOR), testing/inspection agencies, and HCAI field staff; support required observations and documentation, testing, TAB, functional commissioning, integrated system verification, staff

training, O&M manuals, record documents, phased occupancy and regulatory closeout.

Professional Standards and Firm Qualifications

Services shall meet the ordinary professional standard of care. Firms must demonstrate California-licensed architectural/engineering leadership; HCAI-regulated healthcare infrastructure experience; knowledge of HCAI plan review, construction administration and closeout; seismic/nonstructural system coordination; occupied-facility phasing; critical utility outage planning; commissioning; and documented independent QA/QC. Design professionals retain responsibilities assigned by law and contract.

Deliverables and Authorization

Task-order deliverables may include OPR and basis-of-design reports, assessments, SD/DD/CD and HCAI submittal packages, calculations, specifications, phasing and shutdown plans, QA/QC records, estimates, construction administration and HCAI response records, testing/commissioning documentation, and closeout materials. Services shall be authorized through project-specific University task orders within the maximum agreement value of $2,000,000.

WORK SCOPE 4
Information Technology, Security, Patient Safety and Building Monitoring Design — HCAI and Non-HCAI Projects
Maximum Agreement Value: $2,000,000

The University seeks qualified technology design and multidisciplinary engineering firms for planning, design, permitting, procurement support and construction administration of IT infrastructure, physical and patient security, clinical communications, building automation, controls and monitoring systems for HCAI-regulated and non-HCAI projects, as applicable. Work may occur in occupied hospitals, clinics, research, education, support and administrative facilities, including upgrades to fiber networks, security, infant protection, nurse call, critical equipment alarms and centralized monitoring.

Core Responsibilities

• Programming and Design: Validate Owner's Project Requirements (OPR), University technology and facilities standards, availability, resiliency, maintainability and future expansion; provide feasibility, schematic design (SD), design development (DD), construction documents (CD) and bid/permit packages.

• Existing Conditions and Systems Assessment: Field-verify MDF/IDF rooms, fiber and cabling, pathways, power, grounding, cooling, security devices, control panels, sensors and monitoring networks; assess capacity, interoperability, obsolescence, cybersecurity interfaces and single points of failure.

• IT, Security, Patient Safety and Building Monitoring Design: Design fiber/copper networks, telecom rooms, wireless systems, electronic access/badging, intrusion detection and CCTV. Include HUGS-type infant protection or equivalent, patient wander/elopement management, RTLS, staff duress, nurse call, Code Blue interfaces, patient observation/tele-sitting and clinical alarm communications as assigned. Integrate door/elevator controls, emergency egress and security response. Design BMS/BAS, direct digital controls (DDC), sensors, supervisory

networks, building/utility metering and centralized monitoring of HVAC, central plant, power/emergency power, UPS, generator/ATS status, critical room conditions (temperature, humidity, pressure), water leaks, equipment faults and utility interruptions. Define alarm priorities, routing/escalation, trend logs, dashboards, data retention and secure interfaces with Facilities, Security and clinical systems.

• Regulatory Jurisdiction and Industry Standards: Identify the applicable authority having jurisdiction for each assignment. Coordinate HCAI plan review, permits, inspections and closeout for regulated spaces, or applicable non-HCAI plan review, permitting, inspections and final approvals through the UCDH Building Department or other authority having jurisdiction; coordinate local agencies where required. Address California building/electrical/fire/accessibility codes, applicable seismic anchorage, life-safety interfaces, patient privacy and cybersecurity. Apply relevant ANSI/TIA, BICSI, NFPA, UL and University technology, Clinical Engineering, Security and Facilities standards.

• Occupied Facility Phasing and Cutovers: Plan staged migrations, temporary coverage, parallel operation, outage windows, patient protection, uninterrupted clinical/security alarms, cutover testing and rollback. Coordinate with University IT, Security, Clinical Engineering, nursing/clinical operations, PO&M, EH&S and infection prevention as applicable.

• Technical Documents and QA/QC: Provide coordinated device plans, risers, integration diagrams, door-control matrices, BMS architecture, point lists, sequences of operation, alarm/notification matrices, monitoring dashboards and device schedules; specifications and CAD/BIM deliverables. Perform independent interdisciplinary, code, cybersecurity-interface and workflow QA/QC at design milestones; document comment resolution.

• Cost, Schedule, Procurement and Construction Administration: Support estimating, lifecycle/value analysis, constructability, long-lead procurement, phased installation and bid documents; review RFIs, submittals, shop drawings, changes and field conditions, and observe installation for consistency with the design.

• Testing, Integration and Turnover: Define cabling certification, access/CCTV testing, infant protection and patient safety alarm verification, nurse call/clinical alarm routing, BMS point-to-point checks, sensor calibration, trending, alarm escalation, equipment status and environmental monitoring verification, simulated fault/loss-of-power tests, network recovery and failover acceptance. Coordinate demonstrations, training, record documents, warranties and applicable HCAI or non-HCAI regulatory closeout.

Professional Standards and Firm Qualifications

Services shall meet the ordinary professional standard of care. Firms shall demonstrate healthcare and institutional IT, physical/patient security, clinical communication, BMS/BAS, DDC and facilities monitoring experience; California-licensed design professionals as required; and specialty resources (e.g., BICSI RCDD and security/controls specialists). Demonstrate both HCAI and non-HCAI permitting experience, cybersecurity/privacy integration, stakeholder coordination, independent QA/QC, commissioning and critical-service migrations.

Deliverables and Authorization

Task-order deliverables may include OPR/basis-of-design, existing-condition assessments, SD/DD/CD and jurisdiction-specific permit packages, infrastructure/device plans, clinical and

security integration matrices, BMS architectures, monitoring point lists and sequences, alarm routing matrices, dashboards and trending requirements, cutover/rollback plans, independent QA/QC records, acceptance and training plans, construction administration records and agency closeout documents. Services require University-authorized task orders within the $2,000,000 maximum agreement.

FORM AND CONTENT OF STATEMENT OF QUALIFICATIONS:
(applies to all work scopes listed above)

Due to the vital need for these facilities, great emphasis will be placed on proven ability to deliver similar projects in a timely manner, including active, successful management of the HCAI review process.

Please address all the items noted in this section in your Qualifications submittal. Your submission documents shall follow the formatting outlined below. Failure to do so will result in your submittal not being considered. Qualifications will be evaluated based on demonstration of meeting the requirements of this RFQ. Qualifications shall be no more than the number of pages indicated below, and all pages should be in 8 ½ x 11 format and tabbed as follows.

Tab 1 - Cover Letter and Organization Introduction (2 pages maximum): Submit a cover letter with general statements about the organization's qualifications for the services described in this RFSOQ. Include at least the following:

a. Firm name, business address, telephone, email address, website address and fax numbers
b. Location of main office and the local office which will serve this project
c. Key personnel who will staff this project
d. Highlight relevant experience delivering comparable projects.
e. Highlight any relevant experience with University of California system, UC Davis Health, and HCAI projects.
f. The Work Scope(s) for which your firm would like to be considered.

Cover Letter should be addressed to Leila Couceiro, Contracts Manager.

Tab 2: Project Experience (4 pages maximum, 1 page per Project): Provide descriptions of four projects that have been executed within the past six years by the firm. The projects described shall be similar to the services being requested. Please include at least the following information:

g. Project name
h. Project owner with current address and telephone number
i. Project duration
j. Year of completion
k. Consultant's role on the project
l. Project description

Tab 3: Team Approach and Experience (6 pages maximum per Work Scope): List all personnel proposed for the project and identify the proposed Licensed Architect, Project Manager and main point of contact for this project. Provide a project organizational chart including both in-house and consulting roles and include the resumes for all proposed project personnel, to include, at a minimum, the following information:

m. Full name, position in the firm, years with the firm and office location
n. Education (list all degrees and institutions), CA licenses and affiliations

o. Project role and responsibilities
p. Relevant project experience

Tab 4: Project Approach (4 pages maximum per Work Scope): Describe your firm's understanding of the work scope(s). Describe your firm's approach to working with your client to understand the needs of a project and how this understanding is used to develop an appropriate project scope and team to expertly deliver the project. Describe your firm's approach for keeping projects on budget and on schedule.

Submittal should be specifically tailored to this RFQ and include a completed Consultant Statement of Qualifications Form (attached). Provide attachments as appropriate to respond directly to the screening criteria. Boiler plate or generic pages are not desired.

One pdf copy of your firm's statement of qualifications must be received by the University **no later than December 3, 2026 by 2:00 p.m.** via upload link provided by Leila Couceiro, Contracts Manager - lccouceiro@health.ucdavis.edu.

SCREENING CRITERIA:

1. **Project Experience (Tab 2):** Previous experience that demonstrates success in completing comparable projects. Preference will be given for those teams who demonstrate that the relevant projects were delivered by the personnel proposed for assignment to this project.
   Points: 30 per work scope

2. **Team Approach and Experience (Tab 3):** Clear and appropriate definition of roles including a project organizational chart and resumes. Proven staff experience and expertise to manage and deliver projects with a variety of scope and complexity.
   Points: 40 per work scope

3. **Project Approach (Tab 4):** Proven project management expertise with the ability to create and manage a project process. Proven ability to create and manage a project process within a defined budget and schedule. Project implementation approach tailored to the special needs of the project.
   Points: 30 per work scope

SELECTION PROCESS AND SCHEDULE:

The selection of firms for each Work Scope category will be accomplished by the following process: After Qualification Statements are received, a Screening Committee will review, conduct reference checks, and recommend a short list of firms for brief interviews. The identified design and/or project manager for each category must be present at the interviews to be conducted by the Selection Committee. The target dates are listed below:

1st Ad for services:	November 12, 2026
Statements due:	2 p.m. December 3, 2026
Screening completed:	December 18, 2026 (tentative)
Interviews completed:	January 14, 2027 (tentative)
Selection completed:	January 15, 2027 (tentative)
Firm's notification(s):	January 18, 2027 (tentative)

UPCOMING CAPITAL PROJECTS

Project Title	Estimated ROM Cost
Research 1 Waste Pipe Projects	$8M
Research 2 Waste Pipe Projects	$8.5M
Research 3 Waste Pipe Projects	$9.5M
Research 1,2,&3 E-Power Upgrades	$6M
University Tower (G070) Supply Fan-1 Replacement	$1M
Infrastructure – Davis Tower – RM 1612 – DT2 RM 2612 Replace ATS 2CF	$1M
ACC Building Envelope Sealant Replacement	$4.5M
Central Plant Roof and Wall Replacement	$2.5M
Cypress Building Roof Replacement	$7.2M
Davis Tower Roof Replacement	$6M
East Wing Roof Replacement	$6.2M
CC Ground Rm G0133 Replace ATS and Panel Board	$3M
DT Ground Rm G0800 Replace Fire Pump ATS 1&2	$4.2M
East Ground Rm. 0640 Replace Domestic Water Pump Skid	$1.7M
UT Ground Rm. 0670 Replace Domestic Water Pump Skid	$1.7M
Cancer Center Exterior Basement Roof Replace Waterproof Membrane	$6M
SDSC 1st floor - ORs - Waste Anesthesia Gas Disposal	$500K
CUP Rm.1004 Fuel Tank Vent Piping to Exterior	$5M