

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. Zone Atlas Maps can be found on this website: <https://www.cabq.gov/planning/agis-maps/maps-for-the-public>

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.

YOUR PROJECT NUMBER IS: _____

Planning Department Design Review

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Or

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