

Tall Pine Council, BSA

Properties Committee Project Approval Form

Project Title: _____ **Proposed Start Date:** _____
Project Leader: _____ **Phone:** _____

Properties Comm. Rep: _____ Contact Information: _____ _____	Contractor: _____ Contractors Rep: _____ Contact Information: _____
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Description of Work to be Completed: _____

Expected Benefit of Work to be Completed: _____

<u>Materials</u>	<u>Donated or Purchased</u>	<u>Value</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

<u>Labor</u>	<u>Donated or Purchased</u>	<u>Value</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Properties Committee Review

Comments: _____

Disposition: _____

Signature (Print): _____ (_____) Date Signed: _____

Risk Management Committee

Notification Date: _____ Evaluated By: (print name) _____ Date: _____

Comments: _____

Signature (Title): _____ (_____) Date Signed: _____