

Salisbury NHS Foundation Trust
Estates Development Office
Space Allocation Request Form

Date:.....Proposer:.....Ext:.....

Department:.....

Directorate Manager:.....

Present Location:.....

Proposed Location:.....

Outline Proposal or reason for needing the space (if necessary use a separate sheet to provide a complete description and layout diagram).

Please consider co-location with other services, space required, number of occupants, clinical or non- clinical area.

Is any space being vacated in return for this proposal?.....

Is the space currently used by another Department Yes/No?
.....

Business Need/Business Case (confirm a copy is attached).....

Funding requirements: Identify any funding source:.....

Signatures:

Proposer:.....

Directorate Manager:.....

Estates Development use: Date Application Received:.....