This form must be completed for any change to OSU university space due to new construction, remodel/renovation, or minor reallocation.

**Type of Construction/Allocation:**
- [ ] New Construction
- [ ] Remodel/Renovation
- [ ] Minor Reallocation

**BUILDING NUMBER:** [ ]
**BUILDING NAME:** [ ]

### SURRENDERING Departmental Information:

- Department Releasing Space: [ ]
- Campus Address: [ ]
- Principal Investigator: [ ]
- Telephone: [ ]
- Date: [ ]
- Dean/Director/Dept Signature: [ ]

### ACCEPTING Departmental Information:

- Department Accepting Space: [ ]
- Campus Address: [ ]
- Principal Investigator: [ ]
- Telephone: [ ]
- Date: [ ]
- Dept Head Signature: [ ]
- Date: [ ]
- Dean’s Signature (proxy): [ ]

### Accepting Department space inventory data

<table>
<thead>
<tr>
<th>Room No.</th>
<th>Room Type</th>
<th>Room Use</th>
<th>Capacity</th>
<th>Occupant’s Name</th>
<th>EClas</th>
<th>PI</th>
<th>Grant</th>
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</tbody>
</table>

### Facilities Use Only

- Facilities Contact: [ ]
- Facilities Authorizing Signature: [ ]
- Date: [ ]
- Space Inventory Updated: [ ]

**SIC FORM ROUTE CHECKLIST:**

- Original submitted to Surrendering Dept.
- Accepting Information and Signatures
- Facilities Planning Dept for Processing
- Forms completed and distributed

**COPY DISTRIBUTION:**

- WORK COORDINATION CENTER (OAK CREEK BUILDING)
- PLAN CENTER (OAK CREEK BUILDING)
- ACCEPTING AND SURRENDERING DEPARTMENT CONTACT
- KEY SHOP
- BUILDING MANAGER
- CUSTODIAL SERVICES (ARAMARK)
- SECURITY SERVICES
- BUSINESS SERVICES (Fixed Asset Inventory)

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*SIC Form: Revised 2-18-2008*