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| *Delegated Design items shall be identified by the Consultant at the conclusion of the Design Development Phase and updated at the conclusion of the Construction Documents Phase. The Department will review the proposed Delegated Design items and, if necessary, meet with the Consultant to discuss and approve or disallow on a per item basis.* |

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| **Project Information** | |  | |  | |  |  |
| 1. | **Project Phase Submission:** | |  | | Design Development (DD) |  | Construction Document (CD) |
| 2. | **To:** | | Click or tap here to enter text. | | | | |
| 3. | **Project Number:** | | Click or tap here to enter text. | | | | |
| 4. | **Project Name:** | | Click or tap here to enter text. | | | | |
| 5. | **Project Address:** | | Click or tap here to enter text. | | | | |
| 6. | **Client Agency** | | Click or tap here to enter text. | | | | |

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| **Consultant / Subconsultant Information:** | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Prime** | **Sub** | | | **Firm Name:** | | | | | | | | | | | | | **Discipline:** | | | | | | | | |
|  |  | | | Enter Firm Name. | | | | | | | | | | | | | Enter Discipline. | | | | | | | | |
|  |  | | | Enter Firm Name. | | | | | | | | | | | | | Enter Discipline. | | | | | | | | |
|  |  | | | Enter Firm Name. | | | | | | | | | | | | | Enter Discipline. | | | | | | | | |
|  |  | | | Enter Firm Name. | | | | | | | | | | | | | Enter Discipline. | | | | | | | | |
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| Prime Consultant: | | | | |  | Enter Name. | | | | |  | Enter Title. | | | | | |  |  | | | |  | Date. |  |
|  | | | | |  | Name | | | | |  | Title | | | | | |  | Signature | | | |  | Date |  |
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| **Delegated Design Items:** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | ***For DAS Office Use Only*** | | | | |
| **CSI Section:** | | | | | | | | **CSI Description:** | | | | | | | | | | | | | **Allowed** | | | **Not Allowed** | |
| Enter CSI Section. | | | | | | | | Enter CSI Description. | | | | | | | | | | | | |  | | |  | |
| Enter CSI Section. | | | | | | | | Enter CSI Description. | | | | | | | | | | | | |  | | |  | |
| Enter CSI Section. | | | | | | | | Enter CSI Description. | | | | | | | | | | | | |  | | |  | |
| Enter CSI Section. | | | | | | | | Enter CSI Description. | | | | | | | | | | | | |  | | |  | |
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| **Authorized Approval:** | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Project Manager: | | | | | | | Enter Name. | | | | | | | |  | |  | | | |  |  | Date. | |  |
|  | | | | | | | Name | | | | | | | | | | Signature | | | | Date | | | | |
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| Assistant Director  Project Management: | | | | | | | Enter Name. | | | | | | | |  | |  | | | |  |  | Date. | |  |
|  | | | | | | | Name | | | | | | | | | | Signature | | | | Date | | | | |
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| Chief Architect: | | | | | | | Enter Name. | | | | | | | | |  |  | | | |  |  | Date. | |  |
|  | | | | | | | Name | | | | | | | |  | | Signature | | | | Date | | | | |
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| **Copies :** | | |  | PM | | | | | |  | ADPM | | |  | Chief Architect | | | | |  | Consultant | | |  | Project File | |