

**BOARD OF PUBLIC WORKS
AGENDA ITEM REVIEW REQUEST FORM**

Date: 05/19/2026
 Name: Caitlin Wyant, EI Department of Public Works – Engineering Division
 BPW Date: 05/26/2026 Phone Extension: 7483

Required Prior to Submittal to Board

BPW Attorney	<input checked="" type="checkbox"/>	Attorney Name
Dept. Attorney	<input type="checkbox"/>	Attorney Name
Purchasing	<input type="checkbox"/>	_____

Check the Appropriate Item Type – Required for All Submissions

<input type="checkbox"/> Professional Services Agreement	<input type="checkbox"/> Contract	<input type="checkbox"/> Proposal
<input type="checkbox"/> Open Market Contract	<input type="checkbox"/> Amendment/Addendum	<input type="checkbox"/> Special Purchase, QPA
<input type="checkbox"/> Bid Opening	<input type="checkbox"/> Bid Award	<input type="checkbox"/> Req. to Advertise <input type="checkbox"/> Title Sheet
<input checked="" type="checkbox"/> Quote Opening	<input type="checkbox"/> Quote Award	<input type="checkbox"/> Reject Bids/Quotes
<input type="checkbox"/> Proposal Opening	<input type="checkbox"/> C/O & PCA No. _____	<input type="checkbox"/> PCA
<input type="checkbox"/> Chg. Order, No. _____	<input type="checkbox"/> Traffic Control	<input type="checkbox"/> Resolution
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Ease./Encroach

Required Information

Company or Vendor Name	_____	
New Vendor	<input type="checkbox"/> Yes <input type="checkbox"/> If Yes, Approved by Purchasing	
	<input type="checkbox"/> No	
MBE/WBE Contractor	<input type="checkbox"/> MBE <input type="checkbox"/> WBE	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Completed E-Verify Form Attached	
Project Name	Walker Field House Restoration Ph2 - Masonry	
Project Number	125-044B	
Funding Source	IN DNR DHPA Grant + Local Match	
Account No.	PR #48174	
Amount	_____	
Terms of Contract	_____	
Special Contract Provisions	_____	
Purpose/Description	Restoration of masonry at historic field house at Walker Field Park	

For Change Orders Only

Amount of	<input type="checkbox"/> Increase	\$ _____
	<input type="checkbox"/> Decrease	(\$ _____)
Previous Amount	\$ _____	
	Increase	_____ %
Current Percent of Change:	Decrease	(_____ %)
New Amount	\$ _____	
	Increase	_____ %
Total Percent of Change:	Decrease	(_____ %)
Time Extension Amount:	_____	
New Completion Date:	_____	