

CALPIA No:	
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Request for Modular Systems Furniture (MSF)

Agency Information		Agency Contact Information	
Agency:		Name:	
Project Name:		Phone Number:	
Address:		Email:	
City, State, ZIP:			

MSF Information

Number of Workstations:		Number of Rooms:	
Percent of Facility already MSF:		Which Manufacturer:	

Installation information

Estimated Installation Date:		Will installation be in phases?	Yes	No
If yes, please specify:				
Estimated Occupancy Date		Is the lease signed?	Yes	No

Space Plan Information

RESD Project #:		Planner Name:	
Phone Number:		Email:	

Have space plans been completed? Yes No Is typical known? Yes No

Please indicate the MSF Request
(see [Panel Systems - CALPIA Store](#) for product information)

Century MSF Legion MSF Reconfigure Space Plan Waiver

Additional comments/waiver justification

Accepts this project with: Century MSF Legion MSF

Accepts conditionally, need: Space plan by: Purchase order by:

MSF Manager (916) 358-1739	Date	MSF Coordinator (916) 358-1740	Date

Waives this project on MSF Scope:

Products Management Specialist	Date

A CALPIA waiver for MSF is based on the scope provided on this request, if the scope changes and/or there is a change in the time-line of more than 90 days; a new MSF review is required. If CALPIA waived this project General State Agency Exemption Request (SAL-F001), is not needed.

Email form to msf.mailbox@calpia.ca.gov