Retail Store Renovation CapEx Request **PROJECT INFORMATION** Store Name/Number Location Date Requested By

Position/Department			
PROJECT DESCRIPTION			
Scope of Work			
Reason for Renovation			

FINANCIAL SUMMARY

Total Estimated Cost Requested CapEx Amount

ESTIMATED COST BREAKDOWN

Item/Category	Vendor/Contractor	Estimated Cost	Notes

TIMELINE

Date

Estimated Start Date			
Estimated Completion Date			
APPROVALS			
Department Head Name			
Signature			

Finance Department Name	
Signature	
Date	