Include the following information in the Schematic Basis of Design narrative. See DCSM section 2.1 and 2.4 for additional details.

**Instructions**:

Indicate your response to each item in the checklist. Select ‘Yes’ if the checklist item has been completed in full. Select ‘No’ or ‘N/A’ if that item is not included or not required for the specific project. Explain why that item has not been included in the submittal.

|  |  |
| --- | --- |
| **RESPONSE** | **REQUIREMENTS** |
| Choose an item. | Provide general computations supporting system selection, member depth, floor-to-floor heights, and mechanical and electrical loads. |
| Choose an item. | Describe the design features proposed to make the facility conform to the applicable Accessibility standard. Include Universal Design that incorporates access for all persons in the initial planning of all new facilities. Clearly present these features in the design documents. |
| Choose an item. | Provide a statement of compliance with the VT CAC. |
| Choose an item. | Provide proposed building location on the site. Indicate how this project is located in relation to other nearby facilities. |
| Choose an item. | Provide the total square foot area per floor and per building. |
| Choose an item. | Provide total volume in cubic feet. |
| Choose an item. | Provide number of beds, seats, or parking spaces, where applicable. |
| Choose an item. | Indicate future construction or expansion to be accommodated, if any. |
| Choose an item. | Provide total estimated construction cost based on the schematic documents. |
| Choose an item. | Provide total proposed project budget. |