Mail forms to: Florida Department of Education Bureau of School Business Services Fixed Capital Outlay Office 325 W. Gaines St Room 824 Tallahassee, Florida 32399-0400 Phone: 850-245-0495 Fax: 850-245-9135 Email: askfco@fldoe.org				FLORIDA DEPARTMENT OF EDUCATION Bureau of School Business Services Fixed Capital Outlay Office CAPITAL OUTLAY REQUEST ENCUMBRANCE AUTHORIZATION (Instructions on Reverse)		FCO USE ONLY			
1. Agency Name 2. Agency Number			Number	3. Fund Names: 00 PECO 03 General Revenue 01 Capital Improvement Fees 05 Lottery 0 Other:		4. Agency Contact Name: (Please Print)			
5. Date Completed:]			6. Phone: Fax: Email:			
7. Project Identification:					8. Agency Application:				
	Division Number	Project Code Number	FD	OE Project Name	Name of School/Facility as shown o current approved survey		Phase Code	Amount Requested	Date Encumbrance Needed

Signature of Superintendent, College President or University President_

The above signature certifies that the projects listed above comply with sections 1013.01(16), 1013.31(2), 1013.64(5) and (6)(a), 1013.65(8), F.S., or other applicable laws.

INSTRUCTIONS FOR COMPLETING THE REQUEST FOR ENCUMBRANCE AUTHORIZATION FORM – FCO 352

General Instructions

- Complete the request online in the PECO system or prepare form FCO 352 for each fund source being requested (download is available at: http://www.fldoe.org/core/fileparse.php/7735/urlt/0075383-form352.doc).
 Each request should be submitted 20 down in advance of requesting a cosh.
- 2. Each request should be submitted 30 days in advance of requesting a cash disbursement of the same funds. Forms will be processed within five working days of receiving the request. Submit forms to:

Florida Department of Education Bureau of School Business Services Fixed Capital Outlay Office 325 W. Gaines St. - Room 824 Tallahassee, FL 32399-0400 FAX 850-245-9135 Email askfco@fldoe.org

Specific Instructions

1. 2. 3. 4.	Agency/District Name: Agency Number: Fund Name: Agency/District Contact Signature:	Enter the district/college name Enter the three digit FDOE agency number. Check source of funds for encumbrance. Signature of person that is responsible for completing the report.
5.	Date Completed:	Enter date form was completed and signed.
6.	Phone/Fax Numbers:	Enter phone & fax numbers of person who completed the form.
7.	Project Identification:	Enter this information from the form FCO 442 (Cash Disbursement Request) that is mailed to your agency each month.
	Fiscal Year Appropriation:	Enter fiscal year funds were appropriated by the Legislature (e.g., 14/15).
	Division Number:	Enter two digit FDOE division number
	Project Code Number:	Enter four digit alpha numeric code number assigned to the project as found on form FCO 442 for the district.
	FDOE Project Name:	Enter the project name as found on form FCO 442 for the district.

8.	Agency Appli	cation:	Information is supplied by the agency concerning
	Name of	School/Facility:	where and how the encumbrance will be applied. Enter the name of the school or building at the local level where the encumbrance is being requested. This name should be consistent with the name found in the district's or college's facility plant survey.
	Phase Co	ode:	Enter the number from the list below that indicates the phase of the project.
	05	Repayment of proje	
	10		ng buildings and land
	15 Site acquisition		5 5
 20 Water supply & se 25 Planning 30 Construction 35 Planning and cons 			vage - existing site
			5 5
			ruction
	40	Equipping	
	45	Planning, construct	ion and equipping
50 Construction and e			
			struction and equipping
	60 Maintenance and65 Renovation70 Remodeling		
8		Remodeling and re	novation
	80 Roof replacement		
	85	Site development	
90 Site improvement			
	95	Site improvement in	ncident to new construction
Amount Requested: Date Encumbrance Needed:			Indicate the amount of funds requested for each encumbrance authorization. A requested decrease should be shown with ().
			Enter the month, day and year the request is needed. Allow at least 5 working days for each encumbrance to be processed.