ARCHDIOCESAN BUILDING COMMISSION ARCHDIOCESE OF INDIANAPOLIS QUESTIONNAIRE FOR BUILDING AND RENOVATION PROJECTS

Please complete and return this form to: Archbishop Edward T. O'Meara Catholic Center, Attn: Archdiocesan Building Commission, P.O. Box 1410, Indianapolis, IN 46206-1410.

Additional copies of this questionnaire are available from the Office of Management Services.

DESCRIPTION OF PROJECT

Name of	Parish/Agency	Date
Address		
	Describe the project and why it is necessary: aclude preliminary sketches if available.	
W	f this is a new Church Building or renovation: That are the worship needs of your parish? Has this pro- ave parishioners had a chance to give their input?	
	Has this project been discussed with the Director Office # is: 236-1452 or 1-800-382-9836, ext. 1452.	or of Management Services?
Submitted	l by:	Date
	Pastor/Administrator	Date
<u>Approve</u>	ed to proceed by:	
	Chairperson, Church Art & Architecture Committee	Dateee or Director of Dept. of Schools
	Chairperson, Archdiocesan Building Commission	Date
	A 1111	
	Archbishop	