|  |  |
| --- | --- |
| **Cost Center Number:** |       |
| **Valid from Date:** |       | **Valid to Date:** | 12/31/9999 |
| **Cost Center Name:** |       |
| **Cost Center Description:** |       |
| **Agency Responsible:** |       |
| **Cost Center Category:** | **[ ]  Operating (O)** **[ ]  Cost Pool (C)** |
| **Cost Center Address (Required Fields, no PO Boxes):** |
|  | **Street Address:** |       |
|  | **Location (City):** |       |
|  | **Region (State):** |    | **Postal Code (ZIP):** |       | **District (County):** |       |
| **Is this location within city limits?****Does cost center require budget control at level lower than appropriation?** |  [ ]  **Yes** [ ]  **No** [ ]  **Yes** [ ]  **No** |
| **Will this cost center be used to assist in the tracking of the****American Recovery and Reinvestment Act of 2009 (ARRA)?** **If yes to ARRA, a - c are required:**  | [ ]  **Yes** [ ]  **No** |
| **a)** | **WBS Element (statistical):** |       |
| **b)** | **Project Definition:** |       |
| **c)** | **Project Description:** |       |
| **Funds Management Assignment:** |  |
|  | **Funds Center:** |       |  **Business Area:** |       |
|  | **Fund:** |       |  **Functional Area:** |      |
| **Hierarchy Area:** |       | **Is Hierarchy Area new?** | [ ]  **Yes** [ ]  **No** |
| **Hierarchy Area Name** | **(if new):** |       |
| **Hierarchy Location** | **(if new):** |       |
| **Contact Person:** |       |
| **Phone Number:** |       | **E-mail Address:** |       |