

OT STANDARDS CHANGE REQUEST

Name: _____

Date: _____

Company: _____

Tel. No.: _____

Date/Revision No. of Standard: _____

1. Section/paragraph to be changed:

2. Justification for change (site technical and code issues):
(Attach additional sheets as needed)

BELOW THIS LINE IF FOR INTERNAL USE ONLY

CHANGE APPROVAL

Mr. Dwayne Abrams
PDS Administrator

Date

_____ Yes _____ No