CENTERS OF STANDARDIZATION

Change Proposal & Tracking Form

Standard/Document Impacted:

Standard/Document Number:

Category: ☐ Criteria/Design (Tech) ☐ Operations (Tech) ☐ Construction (Tech) ☐ Life Safety ☐ Contracting ☐ Funding (PM) ☐ Policy/Mgmt (PM) ☐ Other

Name: Office/Agency: Date Submitted:

Email: Phone Number: Urgency:

1) CURRENT DESCRIPTION (Include Document or Drawing Pages as Applicable):

2) PROBLEM:

3) PROPOSED CHANGE :

4) BENEFIT:

This Section to be Completed by Analyzing/Reviewing Official (COS POC):

Name: Office/Agency: Date Recieved:

Email: Phone Number: Date Completed:

Recommended Action: Impact to the Standard:

Analyzing/Reviewing Official's Comments:

This Section to be Completed by Validating Official :

Name: Office/Agency: Date Recieved:

Email: Phone Number: Date Completed:

Validation: Waiver Required?

Validating Official's Comments:

This Section to be Completed by Implementing Official :

Name: Office/Agency: Date Recieved:

Email: Phone Number: Date Completed:

Action Taken:

Implementing Official's Comments:

Administrative Box: Change Proposal Tracking Number: