



DEVIATION / CHANGE REQUEST

Section A – Completed by Initiator			
Title:			
Date Initiated:		Initiated By:	
Initiating Company:		PO No:	
Reference Dwg/Doc:			
Specific Request/Issue: (attach photos or marked up drawing as applicable)			
Risk impact:			
Schedule impact:			
Cost impact:			
Response requested by (date):		/ /	
SECTION B – RESPONSE			
(re-issue of drawings, cost and schedule, risk, calculations, local approvals, communication, impact on stakeholders)			
Response:			
Response By:			
Response Approved By:		Signature:	
Date:	/ /		

TM-H-134	03MAR22	CORP	0	KC	CM	BH	03MAR25
Doc No	Date	CAT	Rev	Custodian	Reviewer	Approved	Next Review