**Project Change Request (PCR)**

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| **Request** | | | |
| Project ID: | | Project Title: | |
| Requested By: | Title: | | Company: |
| Date: | Location: | |  |
| Description of Request: | | | |
| Justification of Request: | | | |
| Request Attachments: ☐ Not Required   ☐ Enclosed | | | |
| **Analysis** | | | |
| PCR Number: | | PCR Title: | |
| Request Type: ☐ Information ☐ Design Change ☐ Scope Change   ☐ Other Change | | | |
| MOC: ☐ Required   ☐ Not Required | | MOC #: | |
| Root Cause: | ☐ Regulatory Issue  ☐ Engineering Request  ☐ Act of Nature | | ☐ Implementation Issue  ☐ Discovery  ☐ Other |
| Reviewed By: | | Title: | |
| Company: | Review Date: | | Phone Number |
| Risks: ☐ Risk Assessment ☐ Environmental Review ☐ Safety Review ☐ SOC Review ☐ Engineering SME | | | |
| Document Impacts: | ☐ Scope Revision  ☐ Design Revision  ☐ Contract Change | | ☐ Contractor Change Order  ☐ Work Order Revision  ☐ AFE Revision |
| Cost Impact: ☐ Not significant ☐ Summarized Below ☐ Additional Funding Approval  Schedule Impact: ☐ Not significant ☐ Summarized Below | | | |
| Cost Impact ($): | | Schedule Impact (Days): | |
| **Response** | | | |
| Disposition: ☐ Approved ☐ Denied ☐ Approved with Conditions | | | |
| Response Attachments: ☐ Not Required ☐ Enclosed | | | |
| **Approval** | | | |
| Project Technical Lead Name: | | Signature: ☐ Not Required ☐ Required  Date: | |
| Implementation Lead Name: | | Signature: ☐ Not Required ☐ Required  Date: | |
| Manager of Projects Name: | | Signature: ☐ Not Required ☐ Required  Date: | |
| Project Manager Name: | | Signature: ☐ Not Required ☐ Required  Date: | |
| Site Engineer Name: | | Signature: ☐ Not Required ☐ Required  Date: | |
| Executive Sponsor Name: | | Signature: ☐ Not Required ☐ Required  Date: | |