

Spokane Regional ITS Architecture Change Request Form

To be Filled Out by Change Originator	
Date of Request:	
Title of Change:	
Type of Change:	<input type="checkbox"/> Stakeholder <input type="checkbox"/> Inventory (Subsystems and Terminators) <input type="checkbox"/> Service Packages <input type="checkbox"/> Operational Concept <input type="checkbox"/> Interfaces (Interconnects/Flows Between Elements) <input type="checkbox"/> Standards <input type="checkbox"/> Agreements <input type="checkbox"/> Project Architecture
Description of Change:	
Reason for Change:	
Originator Information	
 Name:	
 Agency:	
 Telephone:	
 E-Mail:	
To be Filled Out by Maintainer (SRTMC Operations Board Member or Designee)	
Change #:	
Change Status:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Date of Status Decision:	
Comments:	
Documents Affected:	
Date Architecture Updated:	