

Indianapolis Regional ITS Architecture Change Request Form

Change Identification:		Request Date:	
Change Description (describe affected architecture elements):			
Rationale for Change:			
Request Originator Contact Information:	Name:		
	Agency:		
	Address:		
	Telephone:		
	Fax:		
	Email:		
	<i>To be filled out by Architecture Maintainer</i>		
Change Number*:			
Change Decision:	Accept	Reject	Defer
Decision Comments:			
Decision Date:			
Architecture Components Affected:			
Change Type:	Minor	Major	

* XX-YY, where XX = year and YY = chronological value, e.g., the first change request of 2006 would be '06-01'