

CODE CHANGE REQUEST FOR THE EPCOT CODES

DUE MARCH 1ST

Name: _____ Date: _____
Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Email: _____ Phone: _____

RECOMMENDED CHANGE TO CODE:

(Please use actual code section with strike-outs for deletions and underline for additions.)

EPCOT Code Book: _____ Section Number: _____
Proposed Change: _____
(Building, Electrical, Plumbing, etc.)

Justification:

USE ADDITIONAL PAGES, IF NECESSARY

For Internal Use Only

Date: _____ Approved: _____ Approved As Modified: _____ Denied: _____ Code Year: _____