### Requesting Responsible Office/Center:

#### **Directive Information**

Directive ID and subject:

### Identification of Requirement

Requirement paragraph number and description in NPR 1400.1:

Scope (e.g., site, facility, operation, and/or activity) and duration of the request:

## Justification:

Describe the purpose/rationale for this request:

Describe if application of the requirement conflicts with other requirements. If not, check here  $\Box$ 

Describe if the application of the requirement would not achieve, or is not necessary to achieve the underlining purpose of the requirement.

Describe the cost or schedule considerations related to the request. If none, check here  $\Box$ 

Describe the risks that will be incurred if the request is granted. If none, check here  $\Box$ 

# Relief from Environment, Safety, Health, Security Requirements

Describe special circumstances that warrant granting the request.

Describe the actions that will be taken to ensure adequate safety and health and protection of the public, the workers, and the environment.

Signatures		
Requesting Office's Official-in-Charge, or designee:		Revised Suspense Date: (Determine by DMT)
Name:	Signature:	
Approving Office's Official-in-Charge, or designee		□ Approved
Name:	Signature:	🗆 Denied
Justification for denial, if application	able, or additional information if approved.	