

Description of Change (include

implementation date of change): _____

Date: _____

Responsible: _____

	Action Required	Assigned	Due Date	Completed
1. Health and Safety: • Any new health and safety issues?				
2. Environment: • Any new environmental impacts?				
3. Customer: • Any changes to customer requirements?				
4. Any new legal requirements? • Any changes to legal requirements related to operations				
5. Change in Training • Addition/update of training • Elimination of Training				
6. New/update procedures • Any added procedures • Any updates to current procedure				
7. Evaluate Emergency Responses • Changes to specific Emergency response procedures, equipment or training?				
8. Monitoring and Measuring • Any changes to the monitoring or measuring of operational activities? • Any new metrics?				

Comments

Reviews:

Q/HS/E Manager:

Date

Approvals

Plant Manager

Date