

# EXCEPTION REQUEST FORM

**INSTRUCTIONS:** Complete all requested information. Submit only one exception request per sheet. The A/E shall complete a copy of this sheet for EACH item where an exception is requested. All seven issues/items must be answered for EACH exception requested. Incomplete or partially complete requests shall be returned without consideration. Attach any plans, details, cut sheets, illustrations, sketches, calculations, or backup material necessary to fully explain request. A/E to submit completed form to the respective Project Manager listed below.

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**PROJECT NAME:** \_\_\_\_\_

**UNIVERSITY PROJECT NUMBER:** \_\_\_\_\_

**UNIVERSITY PROJECT MANAGER:** \_\_\_\_\_ **PM EMAIL:** \_\_\_\_\_

**PRIME CONSULTANT COMPANY:** \_\_\_\_\_ **PM:** \_\_\_\_\_

**PM EMAIL:** \_\_\_\_\_

**UNIVERSITY STAKEHOLDER REPRESENTATIVES As Applicable** (Vetted prior to submittal)  
Facilities Management, Energy Management, Information Technology, Parking, ETC:

\_\_\_\_\_  
\_\_\_\_\_

**PROJECT PHASE** (Predesign, Schematic Design, Design Development, Construction Documents or Construction): \_\_\_\_\_

**STANDARD DATE:** \_\_\_\_\_

**DATE SUBMITTED TO UNIVERSITY FOR CONSIDERATION:** \_\_\_\_\_

**REQUEST FOR EXCEPTION NUMBER (RFE)** Refer to *Exceptions Tracking Log*: \_\_\_\_\_

1. Standards Section/Paragraph (*verbatim from Standards*):

2. Standards Description (*verbatim*):

3. Requested Exception(s) to Standards *(be specific)*:

4. Does this Request have any Building Code implications or trigger a Code review? If so indicate Code section.

5. Reason(s) for Request:

6. Explanation of “Why” this Exception does not Compromise the Project's Quality:

7. Initial Cost Impact and Life Cycle Cost Impact Analysis *(Provide supporting documentation on how these figures are calculated.)*:

<b>For Exceptions Facilitator Use Only</b>	
Date Submitted:	_____
Date Returned:	_____
Committee Action:	
<input type="checkbox"/>	Approved
<input type="checkbox"/>	Approved with Conditions
<input type="checkbox"/>	Rejected
<input type="checkbox"/>	Other
Facilitator Signature:	_____
Additional sheets may be included along with the committee's	