

Conduct of Engineering Request for Variance or Alternate Method

To display the *VAR Request Metadata* pane for this document, click **File > Info > Properties > Show Document Panel.**

1.0 General

1.1 Document Number: VAR-10468	1.2 Revision: 0				
1.3 Brief Descriptive Title: Revised Storm Water Material (ESM Civil Chapter 3)					
1.4 Affected Program: Engineering Standards	1.5 Request Type: Variance				
1.6a Affected Tech Area 99	1.6b Affected Buildings Sitewide				
1.7 Requestor: Oruch, Tobin H Organization: Enter text.					
1.8 Revision History <table border="1"> <thead> <tr> <th>Revision Number</th> <th>Changes and Comments</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>Initial issue.</td> </tr> </tbody> </table>		Revision Number	Changes and Comments	0	Initial issue.
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0	Initial issue.				

2.0 Affected Conduct of Engineering Program/Documents

2.1 Affected "P" Document: P342 Engineering Standards If against the P document itself, revision (or N/A): N/A	2.2 Subordinate or related document(s) [AP, master spec, LANL ESM chapter & section; or code, Order, standard, etc.]: Document Title/No.: ESM Chapter 3 Civil, Section G10-30GEN General Civil Requirements Revision 3 Document Title/No.: ESM Ch. 3 Section G10 Site Preparation Revision 3 Document Title/No.: ESM Ch. 3 Section G20 Site Improvements Revision 3
2.3 Section/Paragraph: G10-30GEN: 3.5 LANL Documents; G10: Article 6.0 Storm Water Compliance; G20GEN: 1.0 Hydrological Analysis and 2.0 Hydraulic Design	
2.4 Specific Requirement(s) as Written in the Document(s): Entirety of material listed in Field 2.3 above.	
2.5 Contractual, preference, or other basis for requirement in 2.4: The requirements include LANL contractual and preferential statements and guidance.	
2.6 Type of VAR from ESM Chap 1, Z10 [<i>Applies only to standards variances</i>] Type 2	2.7 Discipline Civil

3.0 Request Information & Comments

3.1 NCR required (work has occurred)? No If Yes, NCR Number: Enter text.			
3.2 System/Component Affected OpSystem Acronym & Name URG - Roads and Grounds System Number or Name USTW			3.3 Highest ML Level ML-4
3.4 Proposal with Justification/Compensatory Measures: Replace Civil Chapter 3 material listed in 2.3 above with that in Attachment 1 of this Variance. The attached is up-to-date and in a single document.			
3.5 Attachments Document Title or Description Storm Water Compliance and Design Requirements			
3.6a Project ID N/A	3.6b: Project Name N/A	3.6c: Code of Record Date N/A	
3.7 Duration: Lifetime	3.8a If Finite Period, Start Date: Click to enter a date.	3.8b End Date: Click to enter a date	
3.8c Provide the PFITS number for tracking removal/correction: [PFITSNum]			
3.9 USQD/USID required (Nuclear, High/Mod Hazard)? No If Yes, USQD/USID Number Click here to enter text.			
3.10 QA Review for process change matters potentially affecting LANL's NQA-1 implementation Is a QPA Determination required?: No If Yes , then: Choose an item. QPA Comments: Enter text..			
3.11 POC Determination: Accept POC Comments: Enter text..			
3.12 Management Program Owner's (SMPO) Approval for P341 and APs; P342, ESM, ML-1 and -2, and Contract Matters; and P343 SMPO Determination: Accept Comments: Enter text..			

4.0 Participant Signatures **NOTE:** DO NOT ADD NAMES FROM WITHIN WORD! Save and close the form first, then do 1-4 below:

1. From the SharePoint library, select the document, then click the **ellipsis (...)** in the second column; a small dialog appears
2. In the small dialog click the **ellipsis** again
3. Click **Edit Properties** and check out the document if prompted to Enter names using the controls provided, then **Save**

4.1 POC (Management Program Owner's Representative): O'Brien, John Henry	Organization ES-UI	Signature
4.2 Facility Design Authority Representative [FDARName] FDAR signature not required <input checked="" type="checkbox"/>	Organization Enter text..	Signature
4.3 LANL Owning Manager (FOD or R&D/Program) [FODorPrgrMmgrName] FOD or Program Manager signature not required <input checked="" type="checkbox"/>	Organization Enter text..	Signature
4.4 Quality Reviewer's Name: [QPAName] QPA review/signature not required <input checked="" type="checkbox"/>	Organization Enter text.	Signature
4.5 Safety or Security Management Program Owner's Approval for P341 and APs; P342, ESM and Contract Matters; and P343 Streit, Jim SMPO signature not required (Type 1 variance) <input type="checkbox"/>	Organization ES-DO	Signature
4.6 Additional Signer 1 [AdditionalSigner1] Role: Enter text.	Organization Enter text.	Signature

<p>4.7 Additional Signer 2</p> <p>[AdditionalSigner2]</p> <p>Role: Enter text.</p>	<p>Organization</p> <p>Enter text.</p>	<p>Signature</p>
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<p>4.8 CoE Administrator Signature</p> <p>Salazar-Barnes, Christina L</p> <p><u>NOTE:</u> The CoE Admin is always the last signature placed on this document. The date of that signing is the date of this document.</p>	<p>Signature</p>
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