



VANDERBILT UNIVERSITY  
Facilities

New Logo

Rename

## Facilities Development & Management Variance Request Form

Project Name

Impacted Project Description(s):

eBuilder Project Number

Impacted Project Number(s):

Project Guidelines Section(s) (Number & Title):

move

VU Requestor Name:

Department Unit:

Requestor Email Address:

Request Date:

Design Professional(s) Requestors Name:

Requestor Email Address:

Request Date:

Will any of the proposed changes result in a cost increase or decrease?

Yes      No

If so, identify the estimated amount:

Will any of these changes impact quality?

Yes      No

~~Identify quality changes in the "Justification for Request" below~~

~~Ensure are described~~

above

Will any of these changes impact schedule?

Yes      No

~~Identify schedule changes in the "Justification for Request" below~~

Move all of this down below the justification box.



## **VANDERBILT UNIVERSITY** Facilities

# **Facilities Development & Management**

## Variance Request Form

## Requested Variance to Project Guidelines

## Justification of Request

Reviewed By: Director of Design Date

**For Administrative Use Only Change  
Request Approval or Denial**

Assistant Vice Chancellor of  
Planning, Design & Construction

Assistant Vice Chancellor of  
Maintenance & Operations

## Comments