VR#____

DIVISION OF TECHNICAL RESOURCES (DTR) NIH DESIGN REQUIREMENTS PROJECT SPECIFIC

REQUEST FOR VARIANCE

	To:	Variance Review	(301) 451-4954	
Drawing Reference: Detail Number:	Email: From:	ORFDTRIntakeCenter@mail.nih.gov Project Officer	Phone Email	
Paragraph # in Guidelines:		Work Request Number	Proposed Variance Subject	
Campus On Off		Yes No New Construction	Type e.g. lab, animal, office, BSL?	
(Variances should	be requ	ested during pre-design o		e.)
Project Title				
Building Number		Estimate	d Construction Cost	
Location		Proj	ect Percent Completed	%
Provide recommendation of ostructural, fire protection or o	•	or disciplines to review variance; i.e. me	chanical, electrical, architect, civil,	
	PLEAS	SE DO NOT FILL IN BELOW TH	IS LINE.	
DTR Routing:				
DTR Response:				
APPROVED		☐ NOT APPROVED	☐ REVISE & RESUBMIT	
Variance Number:			Rev.	m.s. 5/13