| DOCUMENT REVIEW / RESPONSE FORM | Project No.: |  |
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| Instructions:   * **Initiator:** Identify yourself, complete header information, and enter comments on the left half of report. The “Comments” sections will grow to accommodate any size entry per item, and you may add rows using the TAB key. When complete, email this document to the OGS Design Project Manager. * Responder: Identify yourself and review each comment. Respond in the right half of the report and indicate if incorporated. The “Responses” sections will grow to accommodate any size entry per item. When complete, email this document to the “Initiator”, the OGS Project Manager and the Pre-Construction Services Group. | | |

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| Initiator: |  | Date: |  | Project Description: *(Project Title, Facility Name and Address)* |
| Agency or Firm: |  | | |  |
| Email Address: |  | | |  |
| Responder: |  | Date: |  |  |
| Agency or Firm: |  | | |  |
| Email Address: |  | | |  |
| OGS Design Project Mgr.: |  | | | Project Phase: |
| Email Address: |  | | |  |

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| ***The responses column shall provide a suitable explanation to each item number comment made by the Initiator.*** |

| Item No. | Drawing No. or Spec. Section | Comments | Incorporated? (Yes/No/NA) | Responses |
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