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Contractor/SI	Submitted By:	Noted By:	OWNER/CLIENT	Project Title:	Approved By:	Noted By:	Date:
	Technical Manager	Gen. Manager			ENGINEERING	ITDD - HEAD	
	Date: ____/____/____	Date: ____/____/____			Date: ____/____/____	Date: ____/____/____	SHT. NO.