



**CITY OF BROKEN ARROW
CONSTRUCTION SPECIFICATIONS
VARIANCE REQUEST**

CV _____ - _____

Project Title: _____ S-T-R _____ - _____ - _____

APPLICANT FIRM: _____ SUBMITTAL DATE: ____/____/____

CONTACT NAME: _____

CONTACT E-MAIL: _____

CONTACT PHONE: ____ - ____ - _____

APPLICANT TO ATTACH EXHIBITS OR PLANS SUPPORTING REQUEST

1.0 Standard Construction Specification(s)/Detail(s)-

2.0 Specific Reason(s) for Variance Request-

3.0 Engineers Recommendation to Resolve Conflict-

Applicant Signature

Date



**CITY OF BROKEN ARROW
CONSTRUCTION SPECIFICATIONS
VARIANCE REQUEST**

CV _____ - _____

4.0 Community Development Lead Engineer Recommendation-

Reviewer Signature

Date

5.0 Engineering & Construction Review Recommendation-

Reviewer Signature

Date

Construction Manager Recommendation

Approval Denial

Conditions of Approval or Denial _____

CM Signature

Date

Engineering & Construction Director Determination

Approval Denial

Conditions of Approval or Denial _____

E&C Signature

Date