



PROPOSAL FOR CODE CHANGE

State Form 41186 (R3 / 5-10)



- INSTRUCTIONS:
1. Only a TYPED copy will be accepted.
 2. ~~Dashed line through material to be deleted~~; underline or bold face material to be added.
 3. Use a second sheet for any material requiring more space.
 4. Return this completed form to: Indiana Department of Homeland Security, Code Services, 402 West Washington Street, Room W246, Indianapolis, Indiana 46204.

| FOR OFFICE USE ONLY | | |
|---|------------------------------|------------------------------|
| Received | Code | Proposal number |
| Code title | | Edition |
| Section number and title | | Page number |
| Proponent | Representing (if applicable) | |
| Address (number and street, city, state, and ZIP code) | | Telephone number () |
| PROPOSED CODE CHANGE (check one) | | |
| <input type="checkbox"/> Change to read as follows <input type="checkbox"/> Add to read as follows <input type="checkbox"/> Delete and substitute as follows <input type="checkbox"/> Delete without substitution | | |
| REASON STATEMENT AND FISCAL IMPACT | | |
| REVIEW RECOMMENDATION | | |
| Approve | | |
| Reject | | |
| Approve as amended | | |
| Further study | | |