## **Product Change Request form**

	DO	CC No.	/	
Part No.: 1 (By: Req	uestor)			
Salee Colou	r Composite A	sia		
Date:				
<b>Product Code:</b>				
Requestor:				
<b>Purpose of Change</b>	:			
Change Item  Product Specifica	ation (SPEC, TDS, and SDS)	ıla	Other	
	Existing Formula	New	Formula	
Comment:				
Part No. 2 (By: Labo Approval of Change	_	☐ Not Approved		
Review By		Approved by:		
Date:/		Date:/		
	(Supervisor)	(Lab Assistant Manager/Lab Manager)		