

Form Number LLCF-047	Issue Date 12/29/09	Revision Date 06/15/23	Form Number LLCF-047
	<b>MOC Form</b>		

**Title** \_\_\_\_\_ **Date** \_\_\_\_\_

**Location** \_\_\_\_\_ **Initiator** \_\_\_\_\_

**Basis For Change (Check All That Apply)**

\_\_\_\_\_ Safety \_\_\_\_\_ Operational Necessity \_\_\_\_\_ Emergency

\_\_\_\_\_ Environmental \_\_\_\_\_ Other

**Description of change**

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**Check Applicable Groups:**

**Reviewed By / Date:**

\_\_\_\_\_ Engineering \_\_\_\_\_

\_\_\_\_\_ Safety \_\_\_\_\_

\_\_\_\_\_ Environmental/Regulatory \_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Operations (Final Approval) \_\_\_\_\_

Check All That Apply	Req'd	Responsibility		Complete	
		Group	Person	Date	Initials
Detailed Job Procedure					
Process Hazard Review					
New/Revised Op. Procedure					
New/Revised Maint. Procedure					
Operator Training					
Contractor Training					
Maintenance Records Update					
P&ID Update					
Equip. Inspection Record Update					
Maintenance Records Update					
Pre-Startup Safety Inspection					
Vendor Data					
Other					

Approval to Proceed with Review \_\_\_\_\_ Date \_\_\_\_\_

Supervisor / Manager