

Ontario EBT Change Request

This Ontario EBT Change Request can be found on the OEB web site at:
XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Requester's Name:	Distributor/Retailer Name:	Phone # :
Date of Request:	Affected XML Transaction Set(s):	E-Mail Address:
Requested Priority (emergency/high/low):	Requested Implementation Date:	Status:

Brief Explanation (This will be copied into the description in the Change Control Summary Spreadsheet):

Detail Explanation (Exactly what change is required? To which Ontario EBT Standards? Why?):

For Change Control Manager Use Only:

Date of Ontario EBT Discussion:	Expected Implementation Date:	
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Ontario EBT Discussion and Resolution:

Priority Classifications

<i>Emergency Priority</i>	<i>Implemented within 10 days or otherwise directed by Ontario EBT</i>
<i>High Priority</i>	<i>Changes / Enhancements implemented with 30 days. The next release, or as otherwise directed by Ontario EBT</i>
<i>Low Priority</i>	<i>Changes / Enhancements implemented no earlier than 90 days, Future Release, or as otherwise directed by Ontario EBT</i>

**Please submit this form via e-mail to both the OEB at XXXXXXXXXXXXX and to the
Change Control Manager, XXXXXXXXXXXX atXXXXXXXXXXXXXXXXXXXX**

Your request will be evaluated and prioritized at an upcoming Ontario EBT meeting or conference call.