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| **TDTMS Issue Tracking Request Form**  |
| **TDTMS Issue Tracking Number:** | **(TDTMS Use)** |
|  **Issue Status:** | **(TDTMS Use)** |
| **Last Modification Date:** | (TDTMS Use) |
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| ISSUE SUBMITTER SECTION: |
| **Submitter Name:** | **Submitting Company Name:**  | **Date of Submission:** |
|  |  |  |
| **Submitter’s E-Mail Address:** | **Phone Number:**  | **Affected Business Process:** |
|   |  |  |
| **Issue Statement:** *(Short description of issue)* |
|   |
| **Operational/System Impact:** *(What is the issue doing to your system and/or operations)* |
|  |
| **Market Impact:** *(What is the issue doing to others)* |
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| **Desired Outcome:** *(What do you expect to change)* |
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| **Once Completed:** |
| **Please submit this completed form via e-mail to current TDTMS Leadership** |

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| **TDTMS DISCUSSION SECTION: (TDTMS Use)** |
| **Date of TDTMS Discussion:** | **Change Request Created (Y/N):** | **Change or Revision Request Tracking Number:** |
|   |  |  |
| **Discussion/Revision History:** | **Referred to TDTMS Subteam (Y/N):**  |  |
|  |
| Recommended Resolution: |
|   |