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DESIGN CREDIT SUBMITTAL

PROJECT NUMBER & NAME

CREDIT NUMBER & NAME

MILESTONE REVIEW

SD	DD	**DATE**	**POINTS**

All mandatory Requirements for this credit have been met.

There are no mandatory requirements for this credit.

NARRATIVE OF APPLICATION / STRATEGY PROPOSED

PROJECT SIGNATURES

PROJECT TEAM REPRESENTATIVE	DATE	**DOT-A REPRESENTATIVE**	DATE
PROJECT CHAMPION	DATE	**OTHER**	DATE