Subject: CHANGE NOTICE

Directive: Enter Subject Code, directive number. See Appendix A for Subject Codes (e.g., “TSR-12-1”)

Title: Enter Directive Name (e.g., “Post-Act Reclamation Program”)

Approval: Enter Director’s Name, Title  Digital Signature Exclusively

1. **Purpose**

The primary purpose of a Change Notice is to rescind an active directive. When rescinding an active directive, provide a brief summary of OSMRE’s decision in this paragraph. Additionally, indicate whether the rescinded directive will be replaced by a forthcoming new issuance or if the rescinded directive is simply being retired.

When it is necessary to change the content of an active directive, or any directive appendix that materially or substantively alters OSMRE’s policy position, a Change Notice will not be used. Instead, the responsible AD/RD/SOH will prepare a new directive or appendix following the steps identified in paragraph 5 of Directive OPM-1.

2. **Summary of Changes**

If the purpose of the Change Notice is to rescind an active directive, enter “N/A” immediately following the paragraph heading. If the Change Notice is for any other purpose, provide a summary of the changes here. Include references to the directive’s paragraph(s), if appropriate.

3. **Effect on Other Documents**

This section will indicate if the Change Notice supersedes or impacts other directives. If there are no effects on other directives, enter “None” immediately following the paragraph heading.

4. **Effective Date**

If the Change Notice will become effective upon the Director’s signature, “Upon signature.” will be entered immediately following the paragraph heading. Otherwise, enter the effective date in long form (e.g., May 12, 2023).
5. **Distribution**

This section will contain information regarding the distribution. In most cases, the following phrase will be entered below the paragraph heading “By electronic format. All OSMRE directives are publicly available at [https://www.osmre.gov/laws-and-regulations/directives](https://www.osmre.gov/laws-and-regulations/directives).”

6. **Contact**

Provide the AD/RD/SOH and responsible office name (e.g., “Program Support Directorate, Division of Regulatory Support”).