

CALIBRATION AND REPAIR REQUIREMENTS WORKSHEET

For use of this form, see TB 750-25; the proponent agency is USAMC.

1. FROM (<i>Customer Address</i>)		2. DATE: (YYYYMMDD)	
		3. REQUESTED ACTION <input type="checkbox"/> Add – New TMDE <input type="checkbox"/> Add – Local Procedure <input type="checkbox"/> Delete <input type="checkbox"/> Add – New System Code <input type="checkbox"/> Change	
4a. REQUESTOR'S NAME	4b. GRADE	4c. REQUESTOR'S ORGANIZATION / UIC	
4d. REQUESTOR'S EMAIL ADDRESS		4e. PHONE NUMBER	
5a. ALTERNATE POC NAME	5b. GRADE	5c. ALTERNATE'S ORGANIZATION / UIC	
5d. ALTERNATE'S EMAIL ADDRESS		5e. PHONE NUMBER	

ITEM INFORMATION

6. NATIONAL STOCK NUMBER	7. MANUFACTURER	8. MODEL NUMBER	9. ITEM DESCRIPTION
10. IS THIS ITEM IN TB 43-180? <input type="checkbox"/> Yes (<i>continue to block 17</i>) <input type="checkbox"/> No (<i>continue to block 11</i>)			
11. DID A PEO / PD AUTHORIZE THIS PURCHASE? <input type="checkbox"/> Yes <input type="checkbox"/> No a. If yes, what organization purchased and fielded this item? <hr/> b. If no, what organization authorized purchase?	12. WAS THE PREFERRED ITEMS LIST (PIL) CHECKED BEFORE PURCHASING THIS ITEM? <input type="checkbox"/> Yes <input type="checkbox"/> No	13. WHAT WEAPON SYSTEM / PLATFORM WILL THE ITEM BE USED FOR?	14. LOCATION(S) THIS ITEM WILL BE FIELDDED TO
15. QUANTITY OF ITEMS ORDERED / FIELDDED		16. DO YOU HAVE CALIBRATION PROCEDURES AND OEM MANUALS? <input type="checkbox"/> Yes <input type="checkbox"/> No	

17. REMARKS

CALIBRATION SUPPORT CAPABILITY

18. IS THIS ITEM A CALIBRATION STANDARD? <input type="checkbox"/> Yes <input type="checkbox"/> No	19. MEASUREMENT TYPE: (<i>Microwave, DC & Low Frequency, Physical, IR/Optical, RADIAC</i>)		
20. CALIBRATION MTL/TYPE	21. REPAIR MTL/TYPE	24. RECOMMENDED ACTION <input type="checkbox"/> Add – New TMDE <input type="checkbox"/> Add – New System Code <input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Add - Procedure (<i>See Box 25</i>)	
22. CALIBRATION PROCEDURE	23. CALIBRATION INTERVAL		

25. REMARKS

26. APPROVED BY (<i>Engineer</i>)	27. DATE	28. PHONE NUMBER	29. CONTROL NUMBER
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