

Instructions

Fill out requestor name, phone extension and date.

Enter the Equipment information (N/A any that do not apply).

Select the type(s) of maintenance that apply. Provide justification in Additional Information if type is No Calibration Required.

For equipment requiring calibration attach the calibration Certificate to this form. If a calibration certificate is not available, the equipment will be sent for calibration.

Requestor:

Name: Richard Davis Phone: 2522 Date: 01 Dec 2020

Equipment Information

Description: CPSM Final Test

Manufacturer: Test Engineering, Custom Model Number: TE0084050-R1

Part Number: N/A Serial Number: N/A

Tool Size/Dimension: N/A

Cost Center: WP72 Work Center: PM WP72

Select all that apply

Calibration ☐ Preventive Maintenance (PM) ☒ No Calibration Required ☐ Calibrate Before Use ☐
Include justification for No Calibration Required

Dates and Procedure

Calibration Date: 28 Aug 2020 Calibration Due: Aug 21

Calibration Interval (Months): 12 Procedure: 735003028

Additional Information: There is no measuring or sigaling devices to calibrate. PM only

Calibration Coordinator Use Only

Equipment ID Number: 10018803

Calibration Coordinator: Adam Townsend

Print

Signature:  Date: 01 Dec 2020

End of Data