

CLASSIFICATION \_\_\_\_\_  
 THIS REQUEST

REQUEST NO. \_\_\_\_\_  
 (TO BE FILLED IN BY CODE 7010)

# NEWPORT RANGE FACILITIES REQUEST

DATE SUBMITTED \_\_\_\_\_  
 SUBMITTED BY \_\_\_\_\_ CODE \_\_\_\_\_ TEL. NO. \_\_\_\_\_

VIA (CHECK AS APPROPRIATE):  
 BRANCH ( ) \_\_\_\_\_  
 DIRECTORATE ( ) \_\_\_\_\_  
 DIVISION ( ) \_\_\_\_\_  
 ESO ( ) \_\_\_\_\_  
 DEPT. ( ) \_\_\_\_\_

TO (CHECK AS APPROPRIATE):  
 EXECUTIVE OFFICER (00A) \_\_\_\_\_  
 NEWPORT RANGE OPERATIONS SECTION (7010) DATE RECEIVED \_\_\_\_\_

### 1. ADMINISTRATIVE INFORMATION

NAME OF PROJECT \_\_\_\_\_  
 CLASSIFICATION OF TEST \_\_\_\_\_ JOB ORDER NO. \_\_\_\_\_  
 SPECIFIC ITEM(S) TO BE TESTED \_\_\_\_\_  
 SPECIFIC TEST OBJECTIVE(S)/REASON(S) FOR REQUEST \_\_\_\_\_  
 NUMBER OF UNITS/TESTS \_\_\_\_\_  
 DESIRED TEST LOCATION \_\_\_\_\_ TEST DATE(S) \_\_\_\_\_

### 2. SAFETY/ENVIRONMENTAL INFORMATION

SPECIAL OR UNIQUE: SAFETY PRECAUTIONS/HAZARDS/WARNINGS \_\_\_\_\_  
 EXPLOSIVE DEVICES  
 YES  NO  
 IF YES, ROUTE VIA ESO BLDG. 162  
 ENVIRONMENTAL DETERMINATION REQUIRED (contact range office)  
 YES  NO  
 IF YES, FILL OUT AND ATTACH FORMS  
 7010-2 AND 7010-3

### 3. PARTICIPATING UNITS

HULL NO. (SHIP) BUREAU NO. (AIRCRAFT)	SHIP CLASS/AIRCRAFT TYPE	REMARKS

### 4. TRANSPORTATION REQUIREMENTS

TEST VEHICLE(S)/ EQUIPMENT TO BE MOVED	MOVED FROM	RETURNED TO	SIZE			WT	NUMBER	REMARKS
			L	W	H			

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## 5. TRACKING REQUIREMENTS

TO BE FILLED IN BY INITIATOR			TO BE FILLED IN BY CODE 7010			
LAUNCH SHIP	RUN DEPTH	VELOCITY	PROJECTOR ATTITUDE	FREQUENCY	BAS. REF. INTERNAL	REP. INTERNAL MULTIPLIER
TARGET						
UNIT-1						
UNIT-2						
UNIT-3						
UNIT-4						
TRACKG SYSTEM <input type="checkbox"/> YES <input type="checkbox"/> NO			NUMBER OF SONOBUOYS REQUIRED			HYDROPHONE DEPTH
LENGTH OF RANGE REQUIRED						

## 6. DATA REDUCTION REQUIREMENTS

POST RUN X-Y PLOT (REAL TIME)	SMOOTHED X-Y PLOTS AND DATA LISTINGS	SPECIAL PLOTS, LISTINGS, OR OTHER REQ.
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

## 7. DIVER REQUIREMENTS

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## 8. OTHER REQUIREMENTS

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REMARKS (SKETCH, IF DESIRED)

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APPROVED BY	DATE	TEST SCHEDULE (DATE)
_____	_____	_____
NEWPORT RANGE OPERATIONS SECTION		

DISTRIBUTION

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