|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***MANDATORY ALTERATION N3258A-*** | | | | | | | |
| The alteration identified below, and attached, has been classified as:  \_ Mandatory – Now: Cranes shall be removed from service until alteration is complete.  \_ Mandatory – Delayed: Alteration shall be accomplished before or during the next ( ) Type A ( ) Type B ( ) Type C inspection per NAVFAC P-307 or within days.  \_ Mandatory – When Needed: Alteration will correct a deficiency when the deficiency occurs.  \_ Mandatory – Site Specific: Approved as a unique alteration for an activity or particular crane. | | | | | | | |
| **ALTERATION IDENTIFICATION** | | | | | | | |
| ACTIVITY | | | | | ORIGINAL ALTERATION NUMBER | | |
| ALTERATION TITLE | | | | | ALTERATION ORIGINALLY LOCALLY APPROVED ( )  SUBMITTED FOR NAVY CRANE CENTER APPROVAL ( ) | | |
| **CRANE DESCRIPTION** | | | | | | | |
| CAPACITY / TYPE | | | MANUFACTURER | | | SPS CRANE  YES NO \_ | |
| **ALTERATION DESCRIPTION** | | | | | | | |
| ASSEMBLY | SUB-ASSEMBLY | | COMPONENT | | | PART | |
| NARRATIVE  COMNAVSEASYSCOM CONCURRENCE: Received \_ N/A | | | | | | | |
| **NAVY CRANE CENTER APPROVAL** | | | | | | | |
| CONFIGURATION MANAGER | | DATE | | PHONE  DSN | | | FAX |
| DIRECTOR IN-SERVICE ENGINEERING | | DATE | | PHONE  DSN | | | FAX |
| **NOTIFICATION OF COMPLETION** | | | | | | | |
| WHEN THE ALTERATION IS COMPLETED, A COPY OF THIS FORM (or e-mail confirmation) SHALL BE RETURNED TO THE NAVY CRANE CENTER WITH THE FOLLOWING INFORMATION:  CRANE IDENTIFICATION **\_** COMPLETION DATE | | | | | | | |
| DISTRIBUTION | | | | | | | |

Figure 6-2