

CRANE ALTERATION REQUEST			PAGE 1 OF
ACTIVITY		ACTIVITY WORK ORDER NUMBER	
CRANE ALTERATION TITLE		CRANE ALTERATION REQUEST NUMBER	
		NAVY CRANE CENTER INFORMATION ()	
		NAVY CRANE CENTER APPROVAL ()	
CRANE DESCRIPTION			
CAPACITY/TYPE	NUMBER	MANUFACTURER	SPS CRANE YES ___ NO ___ ORDNANCE CRANE YES ___ NO ___
CRANE ALTERATION DESCRIPTION			
ASSEMBLY	SUB-ASSEMBLY	COMPONENT	PART
REFERENCES (DRAWINGS, WEIGHT HANDLING DEFICIENCY REPORTS, ETC)			
ENGINEERING DISCIPLINE (Check all that apply): ELECTRICAL ___ MECHANICAL ___ STRUCTURAL ___			
NARRATIVE			
ACTIVITY LOCAL APPROVAL / REQUEST			
PREPARER	DATE	PHONE	FAX or EMAIL
REVIEWER	DATE	PHONE	FAX or EMAIL
CHIEF CRANE ENGINEER	DATE	PHONE	FAX or EMAIL
CONTRACTING OFFICER'S REP. (IF PREPARED AND APPROVED BY CONTRACTOR)	DATE	PHONE	FAX or EMAIL
DATE NAVY CRANE CENTER APPROVAL NEEDED	NAVY-WIDE APPLICATION YES () NO ()		
NAVY CRANE CENTER APPROVAL			
REVIEWER	DATE	PHONE DSN	FAX or EMAIL
DIRECTOR, IN-SERVICE ENGINEERING	DATE	PHONE DSN	FAX or EMAIL
APPROVED ()	CONDITIONALLY APPROVED ()	DISAPPROVED ()	
COMMENTS ON ATTACHED CONTINUATION PAGE(S)		YES () NO ()	

Figure 6-1

<i>CRANE ALTERATION REQUEST</i>	CRANE ALT REQUEST NUMBER	PAGE	OF
NARRATIVE (CONTINUED)			

Figure 6-1