TRANSDUCER MEASUREMENT REQUEST SHEET	REQUESTNO.
	CAL. REPORT NO (Not to be filled in by requestor)
A. CHECK TYPE OF MEASUREMENTDESIRED: Fre	PROJECTNUMBER DATE OF REQUEST REQUIRED COMPLETION DATE REQUESTOR (Name) EXT ODE EXT BOW STERN PORT STBD. Juency of ge in KHz REMARKS

B. ELECTRICALINFORMATION:
1. Cale Type (if other than 2-wire and shield, give color and wiring diagram)
2. Cale Termination Bare Leads Connector (Type)
3. Internal Calibration Resistor Value ohms. <u>NOTE:</u> If Calibration resistor is NOT used, Receiving Sensitivity is a function of cable legnth and type
4. Internal hydrophone preamplifier YES NO GAIN db. Supply voltage/current
5. Termination of signal leads Balanced Unbalenced Other
6. Termination of shield Ground Common Other
7. Is sea ground required at hydrophone/preamplifier cases?
C. TRANSDUCER HANDLING INFORMATION:
 Rigging services will be obtained by requestor for transducers and associated equipment if required. DO NOT have units delivered until notified.
2. Approximate size Shape Weight
3. Cable length, Is Cable on a reel? YES NO Weight of Cable and Reel
4. Is adapter available for mounting to 6" or 12" diameter QC type flange? YES NO
5. If availble, furnish sketch or photograph of unit.
D. DOCUMENTATION:
1. Distribution codes of calibration report:
2. Classification of calibration data:
3. Give any additional instructions required regarding details and presentation of data under Additional Remarks
E. ADDITIONALREMARKS:

NOT TO BE FILLED IN BYREQUESTOR

Assigner Operator:	Date Measurements Started:
Date Measurements Completed:	Date Computations Completed: