

**TEST PLAN SUMMARY  
SENECA LAKE**

**Project Name:**

**Team Leader Name:**

**Phone:**

**Fax:**

**E-mail:**

**Company(s):**

**Number In Team:**

**Clearances Forwarded:**

**General Test Description:**

**Projected Test Date:**

**Projected Overtime Requirements:**

**Active/Passive/Other:**

**Quantity, Sizes and Weights:**

**Engineered Pick Points:**

**Frequency Range<1K, 1K-20K, 20K-100K, >100K:**

**Projected Source Levels:**

**Far Field Requirements:**

**Depth:**

**Patterns:**

**Special Requirements/Requests (i.e. DC, 400HZ, Delta, ...)**

**MSDS Sheets/Hazardous Material:**