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| **EPOXY REPAIR RECORD** QA FORM 17A Planning must fill in blocks identified by a ♦ prior to issuing |  | Page | \_\_\_\_ | of | \_\_\_\_ |
| ◆1. SHIP | HULL NO. | ◆2. JCN | ◆3. LWC/SHOP | ◆4. CWP/REC SER NO. | 5. SYSTEM/COMPONENT/ROTATABLE POOL SER NO. | ◆6. REFERENCES (COMP DETAIL/ASSY DWG & REV) |
|  |  |  |  |  |  | A. |
| ◆7. EPOXY REPAIRS ARE PER: [ ]  UIPI 2560-107 [ ]  UIPI 6300-905 [ ]  OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 8. LEGEND FOR EPOXY METHOD (ENTER APPLICABLE SYMBOL(S) IN BLOCK 9)  | B. |
| SH – SHIM | PE – POWDER EPOXY REPAIR | CP –- COLD PATCH | ♦OT - OTHER (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| B – BUSHING | CE – COLD EPOXY COATING | SL – SLEEVE | C. |
| 9. DESCRIPTION OF REPAIR(S) | 10. REPAIR(S) & TEST ACCOMPLISHED |
|  | 10A. PRE-EPOXY DIMENSIONS | 10B. EPOXY APPLIED | 10C. REQUIRED TESTS/RESULTS |
| ◆PART NO./NAME & DESCRIPTION OF DEFECT AREA(S) (USE BLOCK 11 FOR ADDITIONAL INFO, IF REQUIRED) | ◆REF DWG LTR | ◆ UIPI 2560-107 METHOD OR EPOXY METHOD (See Block 8) | DEPTH OF MACHINING (INCHES) | DEPTH (INCHES) OF REMAINING DEFECTS | SHIM/SLEEVE THICKNESS(INCHES) & MAT’L USED | EPOXY MATERIAL & BATCH NO. USED | REQUIRED TEST LEGEND(Enter number below)1. TAP 2. PULL3. SPARK4. VT CURE5.OTHER (Specify)  |
| REMAINING WALL THICKNESS (INCHES) |
|
| A. |  |  |  |  |  |  | ◆ REQUIRED TEST (See Test Legend) |
|  |  | TEST RESULTS [ ]  SAT [ ]  UNSATFINAL SURFACE FINISH MEETS REQUIREMENTS |
| SIGNATURE/BADGE/DATE | SIGNATURE/BADGE/DATE | SIGNATURE/BADGE/DATE |
| B. |  |  |  |  |  |  | ◆ REQUIRED TEST (See Test Legend) |
|  |  | TEST RESULTS [ ]  SAT [ ]  UNSATFINAL SURFACE FINISH MEETS REQUIREMENTS |
| SIGNATURE/BADGE/DATE | SIGNATURE/BADGE/DATE | SIGNATURE/BADGE/DATE |
| 11. ADDITIONAL INFORMATION/SKETCHES: This block may be used to provide additional information, signatures, and sketches to clarify EPOXY repair area(s). Use the back of the sheet for additional space. (CRAFTSMAN/QAI SUBMIT A DF TO RESOLVE UNSAT DATA) |
| 12. QA INSPECTOR/SHOP SUPERVISOR SIGNATURE/BADGE NO. (RECORD REVIEWED FOR FINAL ACCEPTANCE) | 13. QAS SIGNATURE /BADGE NO. (RECORD HAS BEEN REVIEWED FOR COMPLETENESS) |
|  | DATE |  | DATE |