**HANDLING EQUIPMENT TEST RECORD** Page\_\_\_\_ of \_\_\_\_

QA FORM 17W (Front) For CWPs, planning must fill in blocks identified by a **♦** prior to issuing.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **♦**1. SHIP HULL NO. | | **♦**2. JCN | | | **♦**3. LWC / SHOP | | **♦**4. CWP / REC SER NO. |
| **♦**5. Equipment Description: | | | | | | | |
| **♦**6. Log I.D. Number: | | | | **♦**7. Manufacturer or Local Serial Number (Hull No.- Work Center- Number): | | | |
| **♦**8. NAVSEA Drawing Number/Revision used for Test: | | | | | | | |
| **♦**9. Safe Working Load (SWL) in pounds: | | | | | **♦**10. Dynamic Test Load (DTL) in pounds: | | |
| **♦**11. Static Test Load (STL) in pounds: | | | | | **♦**12. STL Frequency in months: | | |
| 13a. Test Type | 13b. Testing Activity | | 13c. Test Activity Witness | | | 13d. Quality Assurance | |
| Action |  | | Signature | | | Signature | |
| Date | Print Name | | | Print Name | |
| Action |  | | Signature | | | Signature | |
| Date | Print Name | | | Print Name | |
| Action |  | | Signature | | | Signature | |
| Date | Print Name | | | Print Name | |
| Action |  | | Signature | | | Signature | |
| Date | Print Name | | | Print Name | |
| Action |  | | Signature | | | Signature | |
| Date | Print Name | | | Print Name | |
| 14. Remarks: | | | | | | | |

**HANDLING EQUIPMENT TEST RECORD**QA FORM 17W (Back) FIGURE 1

