LLE Controls and Electronics Services request form

Date Submitted:
Project Name:
Task ID:
Principal Investigator:
Project Coordinator:
Account #:
Tag#:
Completion date(s) desired:
Describe scope of work (attach LLE project description sheet if applicable) (design, evaluate, repair, fabricate, test, debug, upgrade, other)
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Purpose: (lab prototype for evaluation only? Or, OMEGA or Omega EP application?

drawings? test report? operator manual?)	
List reference documents: (exists in PDM?)	
	
Requirements or specifications: (or attach document) - Diagram all interfaces and cabling - Inputs, outputs, environment, performance features, connectors	
Communications protocol?, Operator interface?Size, weight, cost, precision, op range, power dissipation, timing, etc.	
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Project Team assigned? Identify engineering liaison. (names of assigned nechanical, optical, software, systems engineers if known)	
Design review(s) presentation required? (provide need dates)	

For Electronics Shop Use Only

1.	Responsible Engineer Name:		<u> </u>
2.	Technician assigned:		
3.	Estimated Spec/Concept/Definition Time:	hour	s. Actual time:
4.	Estimated Design/Document Time:hours	5	Actual time:
5.	Estimated Fabrication Time:hours	Actu	al time:
6.	Estimated Test Time:hours	Actu	al time:
7.	Estimated Install/Qualify Time:hours	s Actu	al time:
8.	Estimated dates that design reviews can be support	ted by:	
CI	OR PDR FDR		_
9.	Actual design review dates		
CI	DR PDR FDR		_
10	. Note reason for commitment slippage, difficulties	encour	ntered:
11	. Documentation Archive Path		
	a. Shop folder title and location:		
	b. Released top level assembly drawing number: _		