CONTRACTORS THERMAL INSULATION REMOVAL INFORMATION SHEET			C-120.3 ID NO.
FROM:			DATE
TO: CODE 120			
JOB ORDER NUMBER		NAME OF SHIP	SHIP HULL NO.
COMPARTMENT/SPACE NUMBER		START DATE	START TIME
COMPLETION DATE	COMPLETION TIME	POINT OF CONTACT FOR THIS JOB	PHONE NUMBER

NOTE: ANY CHANGES TO ABOVE SCHEDULE MUST BE REPORTED TO CODE 120.3 (5623/5797/7372)

REMARKS

VISUAL INSPECTION

RED_____ GREEN_____ LABELED/TAGGED_____

NAME_____

SIGNATURE

SRF 5100/58(7-90)