

REQUEST FOR DISPOSITION OR WAIVER

For use of this form, see TB 43-0140, the proponent agency is U. S. Army DARCOM.

1. <input type="checkbox"/> DISPOSITION					<input type="checkbox"/> WAIVER				
2. LOCATION OF EQUIPMENT					3. DATE <i>(Submission)</i>				
					4. DOCUMENT NO. <i>(Depot Only)</i>				
5. EQUIPMENT NOMENCLATURE									
a. YEAR MFGR.		b. HOURS/MILES		c. NSN		d. MAKE		e. MODEL	
f. SERIAL NO.					g. REGISTRATION NO.				
6. ENGINE MAKE			a. ENGINE MODEL			b. ENGINE SERIAL NO.			
7. MAINT. EXPENDITURE LIMITS <i>(MEL)</i>					MAX. ALLOWABLE PERCENTAGE				
TB					DATE:				
					%				
8. ATTACHMENTS - <i>(INTENSIVE MANAGED ITEMS/AUTOMATIC RETURN ITEMS)</i>									
a. NSN		b. ITEM DESCRIPTION			c. MAKE		d. MODEL		e. SERIAL NO.
9. ESTIMATED REPAIR COSTS <i>(See attached DA Form 2404)</i>				10. REMARKS					
PARTS & MATERIALS									
LABOR COSTS									
MHRS. X\$									
TRANSPORTATION <i>(NICP)</i>									
MISSING ITEMS									
TOTAL COST									
ACQUISITION COST									
REPAIR COST PERCENT				%					
11. TYPED NAME, ORG. & SIGNATURE OF INSPECTOR				14. CONDITION CODE		15. DISPOSITION OF WAIVER INSTRUCTIONS			
12. TYPED NAME & SIGNATURE OF NMP REP.									
13. TYPED NAME & SIGNATURE OF NICP REP.									