

<b>REQUEST FOR TYPE CLASSIFICATION EXEMPTION/LIN FOR COMMERCIAL EQUIPMENT</b> For use of this form, see AR 71-32; the proponent agency is DCS, G-4.		1. DATE  2. TDA/JTA NUMBER
3. NAME & ADDRESS OF REQUESTING ACTIVITY		
<b>SECTION I - REQUEST FOR EXEMPTION FROM TYPE CLASSIFICATION</b>		
4. PROPOSED NOMENCLATURE		
5. EQUIPMENT FUNCTION AND REQUIRED CHARACTERISTICS		
6. LIN CONSIDERED AND NOT ACCEPTABLE FOR THE FOLLOWING REASONS		
7. DATE ITEM IS REQUIRED		
<b>SECTION II - REQUEST FOR LIN</b>		
8. FULL NAME OF MANUFACTURER		9. FSCM
10. ADDRESS OF MANUFACTURER		
11. MODEL NUMBER ASSIGNED BY MANUFACTURER	12. PART NUMBER ASSIGNED BY MANUFACTURER	
13. NSN <i>(if known)</i>	14. UNIT COST	
15. INFO ATTACHED: <input type="checkbox"/> MFG BROCHURE <input type="checkbox"/> DRAWING <input type="checkbox"/> SPECIFICATIONS <input type="checkbox"/> DD FORM 2051 <input type="checkbox"/> PHOTOGRAPHS <input type="checkbox"/> COMMAND EQUIPMENT SURVEY APPROVAL		
16. AMC EXEMPTION FROM TYPE CLASSIFICATION RECEIVED <input type="checkbox"/> YES <input type="checkbox"/> NO  IF YES, ENTER USAFISA LOG NUMBER:		
17. REMARKS		
<b>18. PERSON MOST KNOWLEDGEABLE WITH THE TECHNICAL REQUIREMENTS FOR THE ITEM</b>		
a. NAME		b. PHONE NUMBER <i>(Commercial)</i>
c. ADDRESS		d. DSN NUMBER
19. NAME AND TITLE OF INDIVIDUAL RESPONSIBLE FOR ITEM	20. SIGNATURE	