

STANDARDIZED EQUIPMENT PROGRAM REVIEW OF PROPERTY

NAME OF DIVER	DATE OF REVIEW
UNIT NAME	UNIT DIVE SUPERVISOR NAME

QTY EACH	ITEMS REPORTED :	LOST	DAMAGED	STOLEN	DESTROYED	SACRIFICED	DATE OF LOSS	ACQUISITION COST	REPLACEMENT COST
	Item Description						Serial# (if applicable)	\$	\$
	Item Description						Serial# (if applicable)	\$	\$
	Item Description						Serial# (if applicable)	\$	\$
	Item Description						Serial# (if applicable)	\$	\$
	Item Description						Serial# (if applicable)	\$	\$

- Use a separate sheet of paper if reporting additional items

EXPLAIN THE CIRCUMSTANCES CAUSING REPORTED LOSS OF PROPERTY

I HEREBY CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. DIVER SIGNATURE:	DATE
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UNIT DIVING SUPERVISOR FINDING

UDS SIGNATURE	DATE
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NDC PROPERTY REVIEW BOARD RECOMMENDATION

SEP COORDINATOR SIGNATURE	NDPM SIGNATURE	DATE
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