

DEPARTMENT OF HOMELAND SECURITY
U.S. Coast Guard
REPORT OF SURVEY

1. DATE	2. SURVEY NUMBER	3. UNIT NAME	4. ATU	5. OPFAC
---------	------------------	--------------	--------	----------

6. REQUEST FOR SURVEY

(a) ITEM	(b) TAG NUMBER	(c) MAJOR CATEGORY	(d) MINOR CATEGORY	(e) SERIAL NUMBER	(f) DESCRIPTION	(g) ACQUISITION DATE	(h) ACQUISITION COST

7. REASON FOR SURVEY: Lost Missing Damage (<i>beyond normal wear and tear</i>)	8. Name of Property Custodian	Signature	Date
---	-------------------------------	-----------	------

9. APPOINTMENT OF BOARD MEMBERS

Board Member Names and Grades	a)	b)	
c)	d)	e)	
I, hereby authorize the following individuals to serve on the Board of Survey.	10. SURVEY OFFICER Signature	Name	Date

11. SURVEY REPORT AND BOARD RECOMMENDATION (*Provide additional sheets as necessary*)

(a)

(b) Is neglect, misuse, dishonesty, willful destruction, or theft suspected? Yes No
If yes, refer to Administrative Investigations Manual COMDTINST M5830.1 (series) and CG Claims and Litigations Manual COMDTINST M5890.9 (series)

12. Item(s) surveyed in accordance with Coast Guard regulation by: <i>Signatures and Dates (Board Members)</i>	a)	b)
c)	d)	e)

13. SURVEY REPORT REVIEW AND APPROVAL

(a) COMMANDING OFFICER OFFICE- IN-CHARGE UNIT LEVEL SUPERVISOR	Approved Disapproved		
Have appropriate actions been taken to reduce the loss/missing/damage of property? Yes No Specify: _____			
Name	Title/Position	Signature	Date
(b) REGIONAL MANAGERS (<i>specify</i>)		N/A	Approved Disapproved
Name	Title/Position	Signature	Date
(c) PROGRAM (<i>specify</i>)		N/A	Approved Disapproved
Name	Title/Position	Signature	Date
(d) FINAL AUTHORITY (<i>specify</i>)		CO/OINC/UNIT LEVEL SUPERVISOR is Final Authority	Approved Disapproved
Name	Title/Position	Signature	Date

14. Disposition Instructions

15. Supplemental Information