

**SELECTED SUPPORT EQUIPMENT REPAIR COST ESTIMATE**

<i>1. NOMENCLATURE</i>		2. PART NUMBER	3. NATIONAL STOCK NUMBER
<i>4. REGISTRATION NUMBER</i>		5. MANUFACTURER	
6. ACQUISITION COST	7. DATE OF MFG	8. MODEL NO./SERIAL NO.	9. DATE OF LAST OVERHAUL

ITEM  A	√		MAN- HOUR LABOR  D	COST OF PARTS  E	EXCHANGE PRICE (√)  F	REMARKS AND USER RECOMMENDATIONS  G
	RE PAIR B	RE PLACE C				
1.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
2.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
3.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
4.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
5.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
6.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
7.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
8.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
9.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
10.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
11.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
12.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
13.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
14.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
15.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
16.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
17.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
18.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
19.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
20.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
21.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
22.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
23.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
24.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	

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### **About the ITAOP/savePDF Method**

The traditional Field-by-Field creation process is extremely ineffective and slow.

The only realistic option to create high-quality forms is the Insert-Text-Anywhere-on-Page (ITAOP) method.

The field creation process is about 10,000 times faster than the traditional method; the list of ITAOP features is not even available for the traditional method.

ITAOP savePDF method proved to be very simple and completely reliable for millions of users all over the world (incl. individuals, companies, organizations, government employees).

ITEM A	√		MAN- HOUR LABO D	COST OF PART E	EXCHANG E (√) F	REMARKS AND USER RECOMMENDATIONS G
	RE PAIR B	RE PLACE C				
25.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
26.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
27.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
28.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
29.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
30.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
31.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
32.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
33.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
34.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
35.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
36.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
37.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
38.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
39.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
11. TOTAL DIRECT MATERIAL COST					15. OTHER DIRECT CHARGES	
12. TOTAL DIRECT LABOR COST + BENEFITS					16. TOTAL COST OF REPAIRS	
13. TOTAL (Blocks 11 & 12)					17. MAXIMUM ALLOWABLE REPAIR	
14. INDIRECT EXPENSES+ BLOCK 13						
18. INSTALLATION & MAJCOM			19. SIGNATURE, TITLE, ORGANIZATION AND PHONE NO. OF EVALUATOR			DATE
20. <b>FOR ITEM MANAGER USE ONLY</b>						
IMS/ES COMMENTS						
DISPOSITION DIRECTED						
<input type="checkbox"/> REPAIR LOCALLY/WAIVER GRANTED <input type="checkbox"/> SHIP TO TRC/CONTRACTOR <input type="checkbox"/> DISPOSAL - RECLAMATION OR SALVAGE						
ITEM MANAGER			DATE		TECHNICIAN	
					DATE	