

DOCKING REPORT

PROPELLER

NAVSEA 9997/2 (11-77) (FORMERLY NAVSHIPS 9070/2) S/N 0116-LF-099-9705

NAVSEA RPT. 9997-2

DOCKING DATE

SUBMITTED BY ALL SHIPYARDS AND STATIONS FOR ALL CLASSES OF SHIPS WHEN REPAIRS/REPLACEMENT ARE MADE

PROPELLERS, SHAFT LOCATION

		STARBOARD		PORT		CENTER
		OUTBOARD NO. 1	INBOARD NO. 2	INBOARD NO. 3	OUTBOARD NO. 4	
AS FOUND	NUMBER OF BLADES					
	SERIAL NO.					
	DRAWING NO.					
	TYPE MATERIAL					
	CONDITION *					
AS REPLACED	NUMBER OF BLADES					
	SERIAL NO.					
	DRAWING NO.					
	TYPE MATERIAL					
	CONDITION *					

*Detailed report when necessary on conditions and repairs to be entered on reverse side of this sheet, supplemented with sketches and photographs. (USE NAVSEA 9997/3 FOR DETACHABLE BLADE PROPELLERS)

SOLID

PROPELLER (HUB) DATA

DETACHABLE

SERIAL NUMBER	DRAWING NUMBER	SHIP SUITABILITY	SHAFT SUITABILITY	DIAMETER	PITCH	MANUFACTURER	CONTRACT OR JOB NO.	WEIGHT

SUBMIT PITCH MEASUREMENTS FOR PROPELLERS WHERE INFORMATION IS MISSING OR REQUESTED

SKETCH OF DAMAGE OR LOCATION OF CAVITATION PITTING (IF ANY)

<p>SHAFT NO. <input type="checkbox"/></p> <p>1. TYPICAL BLADE, ALL ALIKE <input type="checkbox"/></p> <p>2. ONLY ONE BLADE NO. ___ <input type="checkbox"/></p> <p>3. SUCTION BACK <input type="checkbox"/></p> <p>4. PRESSURE FACE <input type="checkbox"/></p> <p>5. HUB <input type="checkbox"/></p>	<p>CHECK</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>SHAFT NO. <input type="checkbox"/></p> <p>1. TYPICAL BLADE, ALL ALIKE <input type="checkbox"/></p> <p>2. ONLY ONE BLADE NO. ___ <input type="checkbox"/></p> <p>3. SUCTION BACK <input type="checkbox"/></p> <p>4. PRESSURE FACE <input type="checkbox"/></p> <p>5. HUB <input type="checkbox"/></p>	<p>CHECK</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>SHAFT NO. <input type="checkbox"/></p> <p>1. TYPICAL BLADE, ALL ALIKE <input type="checkbox"/></p> <p>2. ONLY ONE BLADE NO. ___ <input type="checkbox"/></p> <p>3. SUCTION BACK <input type="checkbox"/></p> <p>4. PRESSURE FACE <input type="checkbox"/></p> <p>5. HUB <input type="checkbox"/></p>	<p>CHECK</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>SHAFT NO. <input type="checkbox"/></p> <p>1. TYPICAL BLADE, ALL ALIKE <input type="checkbox"/></p> <p>2. ONLY ONE BLADE NO. ___ <input type="checkbox"/></p> <p>3. SUCTION BACK <input type="checkbox"/></p> <p>4. PRESSURE FACE <input type="checkbox"/></p> <p>5. HUB <input type="checkbox"/></p>	<p>CHECK</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
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Serial No. ___

Serial No. ___

Serial No. ___

Serial No. ___

SIGNATURE

REPORTING ACTIVITY

NAME, CLASS AND NUMBER OF VESSEL