

INTERFACE REVISION NOTICE

Complete all applicable blocks. If needed, continuation sheets may be used. The Preliminary IRN should be of sufficient quality so that, if approved, it may be released to the ICD custodian and/or the MSFC Repository for reproduction and distribution. The following instructions are keyed to the numbers on the form.

1. **AFFECTED ICD NO. & REV.** Enter the complete number and revision of the ICD affected by PIRN.
2. **PIRN NO.** Enter an organizational tracking number for identification until an IRN number is assigned, and the PCN (if assigned) of the basic change action.
3. **IRN NO.** Leave blank. To be completed by the CCB secretary. (IRN number will be assigned only after approval of the proposed change.
4. **SHEET 1 OF ____** Enter total number of sheets.
5. **PROGRAM** Enter the applicable program; e.g.; SEDS-2, AADSF, etc.
6. **PCN** Enter the PCN (if assigned) of the basic change action.
7. **PANEL AFFECTED** Enter the identification of the IEG or other organization controlling the ICD.
8. **TITLE** Enter the exact title of the affected ICD.
9. **EFFECTIVITY** Enter the effectivity(ies) of the change described by the PIRN, including launch vehicle elements upper stages, payloads, experiments, etc., as appropriate.
10. **REASON FOR CHANGE** Enter a brief statement of the reason for the change and include ECR number.
11. **CHANGE ICD EFFECTIVITY TO** Leave blank except when this PIRN is used to change effectivity of the ICD.
12. **CHANGE ICD EFFECTIVITY FROM** Leave blank except when this PIRN is used to change effectivity of the ICD.
13. **IRN NO.** Leave blank except when this PIRN is to be used to change the effectivity of a previous IRN.
14. **NEW IRN EFFECTIVITY** Leave blank except when this PIRN is to be used to change the effectivity of a Previous IRN.
15. **PREVIOUS IRN EFFECTIVITY** Leave blank except when this PIRN is to be used to change the effectivity of a Previous IRN.
16. **DESCRIPTION OF CHANGE** Enter the proposed change to the affected ICD for all sides of the affected interfaces, using continuation sheets if required.
17. **PREPARED BY** Enter the name of the engineer preparing the PIRN.
18. **ORGANIZATION** Enter the name of the preparing organization.
19. **DATE** Enter the date prepared.
20. **CONCURRENCE** Enter the name of the engineering manager concurring in the PIRN.
21. **CONCURRENCES** Leave blank. These fields are to be used to record technical acceptance by the authorized representatives of the interfacing activities or recognized IWG.
22. **APPROVALS** These fields are to be used to identify the applicable CCB and record their approval.