# RECORD ECP

| 1. SUBMITTING CONTRACTOR: | 2. RECORD ECP NUMBER: | 3. PCN: | 4. DATE: |
|---|---|---|---|
| | | | |

## THIS SUBMITTAL CONSTITUTES A RESPONSE TO:

| 5. INITIATOR (COMPANY NAME OR GOVERNMENT AGENCY): | 6. CHANGE NUMBER: | 7. MSFC LETTER NUMBER: |
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| | | |

## CHANGE IDENTIFICATION

| 8. PIRN/IRN/SCN/DCN NO. | 9. DOCUMENT NO. | 10. REVISION | 11. DOCUMENT TITLE | 12. EFFECTIVITY |
|---|---|---|---|---|
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FOR FURTHER INFORMATION CONCERNING THIS SUBMITTAL CONTACT:

| 13. NAME: | 14. ORGANIZATION | 15. EXTENSION: |
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16. THE ABOVE CHANGE(S) IS/ARE ACCEPTABLE AS A DOCUMENTATION CHANGE(S) AND DOES/DO NOT AFFECT COST, SCHEDULE, HARDWARE, AND/OR SOFTWARE. THE ABOVE CHANGE(S) ALSO AFFECT(S) THE FOLLOWING CONTRACTOR(S):

| 17. CONTRACTOR SIGNATURE: | 18. DATE: |
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# RECORD ECP (ENGINEERING CHANGE PROPOSAL) (RECP) PREPARATION INSTRUCTIONS

| BLOCK | INSTRUCTIONS |
|---|---|
| 1 | SUBMITTING CONTRACTOR: Enter the identification of contractor submitting the RECP. |
| 2 | RECORD ECP NUMBER: Enter the record ECP number assigned by the submitting contractor. |
| 3 | PCN: Enter the MSFC-assigned Project Control Number (PCN). |
| 4 | DATE: The date of the RECP is automatically generated by the system. |
| 5 | INITIATOR (Company Name or Government Agency): Enter the identification of the initiator of the charge. |
| 6 | CHANGE NUMBER: Enter the number, if available, of the initiator's change action. |
| 7 | MSFC LETTER NUMBER: Enter the number of the MSFC letter which forwarded the change (if applicable). |
| 8 | PIRN/IRN/SCN/DCN NUMBER: Enter the number(s) affected by the appropriate PIRN(s)/IRN(s)/DCN(s). |
| 9 | DOCUMENT NUMBER: Enter the number(s) of the document(s) affected by the PIRN(s)/ IRN(s)/DCN(s). |
| 10 | REVISION: Enter the revision letter(s) of the affected document(s). |
| 11 | DOCUMENT TITLE: Enter the title(s) of the affected document(s). |
| 12 | EFFECTIVITY: Enter the hardware and/or software effectivity(ies) of the change(s). |

## ENTER CONTACT INFORMATION FOR THIS SUBMITTAL.

| | |
|---|---|
| 13 | NAME: Enter the name of the contractor contact responsible for submittal of this RECP. |
| 14 | ORGANIZATION: Enter the contractor organization responsible for submittal of this Record ECP. |
| 15 | EXTENSION: Enter the phone extension/number of the contractor contact responsible for submittal of this Record ECP. |
| 16 | STATEMENT OF ACCEPTANCE: Enter the name of other contractor(s) considered to be affected by this change. Use an attachment if required. Include any pertinent remarks concerning this change on the attachment. |
| 17 | CONTRACTOR SIGNATURE: To be signed by the responsible contractor official. |
| 18 | DATE: Enter the date the Record ECP was approved and signed. |