

PPPL DESIGN REVIEW CHIT

WP # _____ (ENG-032)

CHIT # 2COMPONENT/SUBSYSTEM/SYSTEM Section 5COGNIZANT DESIGN ENGINEER Brown DATE OF REVIEW 3/11/08

- PEER
 CDR
 PDR
 FDR

SUBJECT: (CHECK AS APPLICABLE)

- | | | |
|---------------------------------------|--|--|
| <input type="checkbox"/> REQUIREMENTS | <input type="checkbox"/> HARDWARE | <input type="checkbox"/> SAFETY |
| <input type="checkbox"/> ANALYSIS | <input type="checkbox"/> CONFIGURATION | <input type="checkbox"/> COST/SCHEDULE |
| <input type="checkbox"/> PERFORMANCE | <input type="checkbox"/> RELIABILITY/MAINTAINABILITY | <input type="checkbox"/> QUALITY |

COMMENT/CONCERN/RECOMMENDATION

Provide a design factor of 5 for the support system including lateral supports since this will be occupied by people

ORIGINATOR M VIOLA
NAME/ORGANIZATION**REVIEW BOARD COMMENT/RECOMMENDATION**

(Address technical, cost, and schedule impacts as appropriate. If CHIT is not adopted, provide technical reasons do not simply state "out-of-scope or N/A" without explaining.)

Action: T. Brown

- CONCUR
 DISAGREE
 OTHER

CHAIRPERSON

J Chyan DATE: 3/11/08**COGNIZANT DESIGN ENGINEER'S RESPONSE/DISPOSITION:**

SIGNATURE _____ DATE: _____

RESPONSIBLE RLM REVIEW

- APPROVE COG DISPOSITION
 DISAPPROVE COG DISPOSITION

SIGNATURE _____ DATE: _____

COGNIZANT DESIGN ENGINEER CLOSE-OUT

Sign when action required by disposition is complete.

SIGNATURE _____ DATE: _____