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| jpl_clr | PROJECT        | **SUPPORT EQUIPMENT****CERTIFICATION RECORD (SECR)** | **SECR NUMBER**       |
| **SUBSYSTEM**      | **Document Archive Location:**      | **COG. ENGR.**      | **EXT.**      | **SECTION**      | **DATE**      |
| **PART REF. DESIGNATOR** | **Part No/Drawing No/****Software Configuration ID** | **Drawing Revision** | **SERIAL****NUMBER** | **SUPPORT EQUIPMENT DESCRIPTION** | **FINAL INSPECTION REPORT NO. (and/or SOFTWARE EVALUATION REPORT)** |
|       |       |       |       |       |       |
| **CHECK APPLICABLE ANSWERS AND GIVE NECESSARY****EXPLANATION IN REMARKS COLUMN** | **YES** | **NO****(NONE)** | **N/A** | **REMARKS AND/OR ADDITIONAL INFORMATION:** **UTILIZE ADDITIONALSHEET(S) IF NECESSARY** |
| 1 |  Have all acceptance and/or functional tests been satisfactorily completed?  (*Provide Test Data and/or Reports and Identify document(s) repository*) | [ ]  | [ ]  | [ ]  |       |
| 2 |  Does this support equipment meet all the design and functional requirements? | [ ]  | [ ]  | [ ]  |  |
| 3 |  Was equipment (hardware and/or software) satisfactorily operated with the  intended interfaces in the subsystem? (*Explain in Remarks Section*) Indicate: [ ] Flight [ ] EM [ ] BB [ ] Simulator [ ]  Other | [ ]  | [ ]  | [ ]  |  |
| 4 |  Is this equipment identical to other units delivered to SIT/ATLO? (*Identify differences, if any*) | [ ]  | [ ]  | [ ]  |
|  This is unit       |  of 1, 2, 3, |        |  |
| 5 |  Does the electrical interface meet the requirements of the circuit data sheets? | [ ]  | [ ]  | [ ]  |
| 6 |  Is the GSE FTA or FMEA complete and without liens? | [ ]  | [ ]  | [ ]  |
| 7 |  Is the equipment calibration current? ( *Provide expiration date(s)* ) | [ ]  | [ ]  | [ ]  |
| 8 |  Have P/FR’s, Waivers, IRs, Review Action Items, and ECRs that affect this  equipment been closed? *If no, attach a list of open items* | [ ]  | [ ]  | [ ]  |
| 9 |  Is there any additional work that needs to be completed? *List any shortages* | [ ]  | [ ]  | [ ]  |
| 10 |  Have manuals, user guides, procedures, drawings, schematics, Release  Description Documents (RDD) or mechanical assembly/usage instructions been  provided? (*Identify document(s) repository*) | [ ]  | [ ]  | [ ]  |
| 11 |  Are there any handling or operational requirements and/or constraints for this  equipment? (*Identify document(s) repository*) | [ ]  | [ ]  | [ ]  |
| 12 |  Does this equipment comply with the Safety requirements of D-51956 and  DocID 34880? (*Identify any non-compliances*) | [ ]  | [ ]  | [ ]  |
| a) For MGSE, is the proof testing certification current? (Provide expiration  date(s) and IBAT number(s))  | [ ]  | [ ]  | [ ]  |
| b) Does this equipment meet lateral stability requirements and include positive  locking features? | [ ]  | [ ]  | [ ]  |
| c) For MGSE, does the equipment meet the design safety factors of D-51956 or  other relevant requirements? *(Provide applicable margin table or analysis*) | [ ]  | [ ]  | [ ]  |
| 13 |  For EGSE, is there a means to safe the equipment in emergency situations? | [ ]  | [ ]  | [ ]  |
| 14 |  For EGSE, is over-voltage/over-current/ground fault protection in place and  verified? | [ ]  | [ ]  | [ ]  |
|  |  Is software a part of this support equipment delivery? | [ ]  | [ ]  | [ ]  |
| 15 | a) If yes, are all operational workarounds, idiosyncrasies, and constraints  adequately described in the user/operational manual or equivalent? | [ ]  | [ ]  | [ ]  |
| b) If yes, is all software and/or firmware used in the development under  configuration management control and released? (*This includes the source*  *code, compiler, operating system, and tools used to create this delivery*) | [ ]  | [ ]  | [ ]  |
| c) If yes, are the storage media/locations, access methods, and installation  instructions for this software identified in the RDD or equivalent? | [ ]  | [ ]  | [ ]  |
|  |  Does this equipment contain any Safety-critical software? | [ ]  | [ ]  | [ ]  |
| 16 | a) If yes, does it meet the software safety requirements in DocID 34880 and  DocID 57653? (*Identify any non-compliances*)  | [ ]  | [ ]  | [ ]  |
| b) If yes, have all hazards pertaining to this software been identified and  appropriate actions taken to ensure that the hazards will not occur during  planned use? | [ ]  | [ ]  | [ ]  |
| 17 |  (Project optional additional question)       | [ ]  | [ ]  | [ ]  |
| 18 |  Does equipment meet Clean Room Compatibility requirements? | [ ]  | [ ]  | [ ]  |
| 19 |  Does equipment meet Contamination Control requirements? | [ ]  | [ ]  | [ ]  |
| 20 |  Is this equipment acceptable for SIT/ATLO integration and testing? | [ ]  | [ ]  | [ ]  |
| COGNIZANT ENGINEER      | DATE      | DELIVERING PDM      | DATE      | SIT/ATLO QA      | DATE      |
| DELIVERING QA      | DATE      | SIT/ATLO MANAGER      | DATE      | SOFTWARE QA/SOFTWARE SYSTEM ENGINEER      | DATE      |
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| **PART REF. DESIG.** | **Part No/Drawing No/****Software Configuration ID** | **Drawing Revision** | **SERIAL****NUMBER** | **SUPPORT EQUIPMENT DESCRIPTION** | **FINAL INSPECTION REPORT NO. (and/or SOFTWARE EVALUATION REPORT)** |
|       |       |       |       |       |       |
| **INSERT ADDITIONAL EXPLANATION AND/OR REMARKS HERE**      |