|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NASA Ames Balance Calibration Lab Request Form  *(Include all applicable information)* | | | | | | | | | | |
| Today’s Date | | | | Date Required | | | | | Test Date | |
| Test Name / Number | | | | | | | Organization/Company | | Test Location | |
| Principal Investigator | | | Phone | | | | Mail Address | | | |
| Test Engineer | | | Organization | | | | Phone | Mail Address | | |
| Ames Balance Requested  *Model, Size, NEMS* | | | | | | | Balance Reserved  From To | | | |
| If Balance is Supplied by User  *Model, Size, Description* | | | | | | | | | | |
| This Balance is used as  *Primary / Backup* | | | | | | | | | | |
| Provide Reduction Matrix  *Yes / No* | | | | | Type of Reduction Matrix | | | | | |
| Balance Excitation Voltage | | | | | Balance Pin to Use (TASK Balances) | | | | | |
| Deflection Data Required | | | | | | | | | | |
| GAGE  NAME | GAGE  CAPACITY | MAX LOAD  TO APPLY | | | | SHUNT  %FS | | | |
| N1 |  |  | | | |  | | | |
| N2 |  |  | | | |  | | | |
| S1 |  |  | | | |  | | | |
| S2 |  |  | | | |  | | | |
| RM |  |  | | | |  | | | |
| AX |  |  | | | |  | | | |

Diagram Task Pin Locations, Thick Side 3, 4, 7, 8



Diagram Task Pin Locations, Thick Side 3, 4, 7, 8

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| --- |
| Combined Loads Required |
| Loading Method, Special Instructions, Additional Information |