

**REQUEST FOR A SEALED SOURCE OR
DEVICE EVALUATION****INSTRUCTIONS:** Send this request AND a copy of all related letters/applications and drawings to the Chief, Sealed Source Safety Section, OWFN Mail Stop O-6 H3. Change the License Tracking System milestone to 19 and assign to reviewer code 1-5.**NOTE:** Retain a copy of this request with the application and background files.

REQUESTER		REGION/LOCATION:	
TELEPHONE NUMBER	DATE	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> OCHCO <input type="checkbox"/> LFARB	
NAME OF APPLICANT		TYPE OF ACTION REQUESTED (Check as appropriate)	
MAIL CONTROL NUMBER(S)		<input type="checkbox"/> SOURCE REVIEW <input type="checkbox"/> AMENDMENT OF REGISTRATION SHEET NUMBER(S)	
LETTER/APPLICATION DATE		<input type="checkbox"/> DEVICE REVIEW	
LICENSE NUMBER(S)		<input type="checkbox"/> CUSTOM REVIEW	
COMMENTS:			
FOR SSSS USE ONLY			
REVIEWER		MODEL NUMBERS	NUMBER ASSIGNED
DATE RECEIVED		DATE ASSIGNED	DATE TO FEES
TYPE OF ACTION (Indicate the number of each type)			
<input type="checkbox"/> COMMERCIAL DISTRIBUTION (FORMAL)		<input type="checkbox"/> USE BY A SINGLE APPLICANT (CUSTOM)	
SOURCE (9C)		DEVICE (9A)	
<input type="checkbox"/> NEW		<input type="checkbox"/> NEW	
<input type="checkbox"/> AMENDMENT		<input type="checkbox"/> AMENDMENT	
SOURCE (9D)		DEVICE (9B)	
<input type="checkbox"/> NEW		<input type="checkbox"/> NEW	
<input type="checkbox"/> AMENDMENT		<input type="checkbox"/> AMENDMENT	
<input type="checkbox"/> NO SAFETY EVALUATION REQUIRED NO FEES REQUIRED		<input type="checkbox"/> LICENSING ACTION REQUIRED (IF KNOWN) <input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> OTHER (Specify)			
TOTAL NUMBER OF REVIEW HOURS		NOTES	
NUMBER OF DEFICIENCY LETTERS			
NUMBER OF DEFICIENCY CALLS			
FOR FEE USE ONLY			
TYPE OF FEE		FEE CATEGORY	
AMOUNT RECEIVED		<input type="checkbox"/> 9A <input type="checkbox"/> 9B <input type="checkbox"/> 9C <input type="checkbox"/> 9D	
CHECK NUMBER	DATE OF CHECK	LOG	
APPROVED BY		DATE OF RETURN	
COMMENTS			