

FAILURE ANALYSIS REPORT				(EXEMPT FROM REPORT CONTING PROCEDURES)
(See SS600-AH-MMA-010 for information concerning use of this form)				
Disposition: Maintain the original of this form in auditable fashion with the UBA for the entire period between NAVSEA certification surveys. Forward copies 1-3 (self-mailers) to the addresses as shown on the bottom right-hand corner and back of the forms.				
1. NAME OF REPORTING ACTIVITY	UNIT IDENTIFICATION CODE	2. REPORT CATEGORY (Check applicable block) <input type="checkbox"/> SAFETY <input type="checkbox"/> ROUTINE	3. REPORT SERIAL NUMBER	
5. DEFICIENCY CATEGORY (Check One) <input type="checkbox"/> EQUIPMENT <input type="checkbox"/> PUBLICATION <input type="checkbox"/> REASON FOR REPORT (Check applicable block)	6. UBA SERIAL NUMBER	7. POINT OF CONTACT FOR ACTIVITY	4. DATE DISCOVERED	COMMERCIAL NO
8. REASON FOR REPORT (Check applicable block) <input type="checkbox"/> FAILURE/FAILURE SUSPECTED OR MALFUNCTION <input type="checkbox"/> WHEN DISCOVERED (Check Applicable block) <input type="checkbox"/> PRELIMINARY <input type="checkbox"/> POSITIVE <input type="checkbox"/> PMS	<input type="checkbox"/> DAMAGE DUE TO IMPROPER MAINTENANCE/OPERATION/TEST	<input type="checkbox"/> DAMAGE OR DEFECTIVE ON RECEIPT	<input type="checkbox"/> OTHER (Explain in item 15)	
9. SYSTEM, SUBSYSTEM, OR COMPONENT(S) AFFECTED	<input type="checkbox"/> DURING OPERATIONS	<input type="checkbox"/> OTHER (Explain here or in item 15)		
10. SYSTEM, SUBSYSTEM, OR COMPONENT(S) AFFECTED				11. REENTRY CONTROL FORM NO (Attach copy)
12. DESCRIPTION OF FAILURE/TROUBLE/DISCREPANCY				
13. CAUSE OF FAILURE/TROUBLE/DISCREPANCY, IF KNOWN				
14. CORRECTIVE ACTION TAKEN				
15. COMMENTS OR RECOMMENDATIONS FOR PREVENTION OR ELIMINATION OF PROBLEMS				
16. SIGNATURE OF PREPARER	RANK/RATE	DATE SIGNED	17. SIGNATURE, APPROVING OFFICIAL	RANK/RATE
				DATE APPROVED

NAVSEA 105601 (12-84)

Figure 6-1. Failure Analysis Report