

GENERAL

1. This form is used to report a Radio Facility Inspection and Offer for Use. This form is also used to report changes in the status of an authorized facility. Radio facility inspections are valid for a period of three years.
2. **TYPE OF REPORT** — Check block to indicate initial, reinspection, or change report.

SECTION I — MEMBER DATA

1. **MEMBER NUMBER** — Enter your seven digit Auxiliary member ID number.
2. **LAST NAME** — Enter your last name.
3. **FIRST NAME AND INITIAL** — Enter your first name and initial.
4. **FACILITY IDENTIFICATION NUMBER** — Enter the facility status & ID number if known; otherwise leave blank for entry by the Director.
5. **FAC. INSPECTION DATE** — Enter month, day and year of inspection. (July 4, 2003 = 070403)
6. **PREVIOUS FACILITY ID NUMBER** — Enter old ID number ONLY if this facility replaces one currently authorized.
7. **PERCENT OF OWNERSHIP** — Indicate your percent of ownership. If less than 100% (i.e., multiple ownership), then submit the information required for Multiple Ownership (see sample in Appendix D in Operations Manual) with CG-2736A. If owned by a corporation, omit owner's member number and name, then insert the word "CORP" in the member ID space and the name of the corporation in the last name space. Also, submit information required for Corporate-owned Facility and the Corporate Resolution (see sample in Appendices B and C in the Operations Policy Manual).
8. **DESCRIPTION OF STATION LOCATION** — Indicate type of property where the station is housed (i.e., truck, car, house, marina, yacht club, trailer, etc.) If transportable, enter "Transportable Facility."
9. **STREET ADDRESS OF STATION** — Indicate address. If transportable, enter "Transportable Facility."
10. **NAME/ADDRESS OF PROPERTY OWNER WHERE STATION LOCATED** — If same as above, check box; otherwise, indicate name and address. If transportable, enter "Transportable Facility."

SECTION II — RADIO FACILITY DATA

1. **TYPE STATION** — Check appropriate box. (Check only one box.)
2. **TRANSMITTER/TRANSCIVER** — Enter make, model and output power of equipment used. ADDITIONAL EQUIPMENT (scanners, etc., especially in LAND MOBILES) may be entered in this area.
3. **GOVERNMENT FREQUENCIES AVAILABLE** — Check those available. If not listed, enter in blank space. For VHF-FM marine transceivers with all channels, check "ALL 156-158 MHz."
4. **EMERGENCY POWER AVAILABLE** — Describe emergency power (e.g., generator -300 watt, 1 kw, 5 kw; battery; etc.)
5. **RADIO DIRECTION FINDING DATA** — Complete this section if the facility has RDF capabilities. Conduct the required tests, enter the test results below and forward this page with the completed inspection report.

A. Operation Test Results: (Minimum of two LOPs obtained).	
#1 Station used _____	Observed LOP _____ Actual LOP _____
#2 Station used _____	Observed LOP _____ Actual LOP _____
#3 Station used _____	Observed LOP _____ Actual LOP _____
B. Estimated usable range _____ NM.	
C. Total time to obtain bearing _____ Seconds	YOUR MEMBER ID NUMBER _____
D. Repeatability of bearing, within _____.	

6. **ANTENNA INFORMATION** — Complete for Fixed Land Facilities Only. Enter antenna make (Antenna Specialists, Shakespeare, etc.) and model number or generic type (dipole, yagi, etc.). Enter the rated gain in decibels relative to an isotropic antenna (dBi) and the frequency range of the antenna (2-30 MHz, 156-158 MHz, etc.). Enter two heights; above ground level which includes all supporting structures like buildings, masts, etc.; and above sea level which is the first height plus the height of local area above sea level. Enter in meters (3.28 ft = 1 meter).
7. **ENTER LATITUDE AND LONGITUDE** (use degrees, minutes, and tenths)
8. **AUXILIARY RADIO FACILITY CALL SIGN** — Enter assigned Auxiliary call sign.
9. **FACILITY AVAILABILITY** — Check applicable box to indicate Anytime (All), Weeknights or Weekends.

SECTION III — INSPECTOR'S ENDORSEMENT AND RADIO FACILITY CHECK

10. **INSPECTOR INFORMATION** - Enter INSPECTOR's seven digit member ID number, and name. Inspector must complete Section II, number 7, and sign and date the form. Enter INSPECTOR's District/Division/Flotilla number.

SECTION IV — OWNER'S MAILING ADDRESS, STATEMENT, OFFER FOR USE & UNIT

1. Enter Owner's mailing address. Owner must sign and date the form to indicate information is correct (notify Director of any changes), the facility is offered for use, and it will be operated per current directives. The primary changes that must be reported are changes in frequencies available, antenna height, station location, or call sign. Enter District/Division/Flotilla to which facility is associated.

SECTION V — ACCEPTANCE BY DIRECTOR

1. This section will be completed by the Director who will write in the expiration date and then sign and date the form.