

## IET LED/TD

### LEDs and Formal TDs

Program (T/M/S) Affected: \_\_\_\_\_ POC: \_\_\_\_\_

LED/TD Number: \_\_\_\_\_ Date In: \_\_\_\_\_

LED/TD Title: \_\_\_\_\_ Date Out: \_\_\_\_\_

(Due 7 days)

New Document       Revision       Amendment

### **GENERAL DESCRIPTION OF LED:**

### **FRCSE IMPACT**

If checked, provide potential shops affected by LED

#### Tools/Equipment

No Impact

New Tools Required *(if checked, provide part number(s), description(s), manufacturer, estimated cost and estimated procurement date):*

Modification of Existing Tools Required *(if checked, provide part number(s) and description(s)):*

#### Labor Hours

Minimal or No Impact

Increase or Decrease in Work Hours *(if checked, provide brief description and estimated labor hours):*

#### Material

No Impact

Increase or Decrease in Material Costs *(if checked, provide brief description of Bill of Material affected and/or material availability):*