NOISE MEASUREMENT DATA FORM

ARLOC Code | Installation | Building Number | Room Number

Location Code | Operation Code

Date Measured: Year | Month | Day

Point of Contact: Mr. | Ms.

Telephone Number | DSN | Commercial

POC's Address

Noise Source Description/comments

Instrument Readings **Continuous dbA** • **Impact dbP** •

Army standard exceeded? 85dBA (based upon limited field evaluation) Y

(is dosimetry recommended to confirm?) Y

Calibration Information

Pre-calibration Daily

Initials

Date: Year | Month | Day

Value dbA

Instrument Serial Number

Post-calibration

Initials

Manufacturer's calibration date: Year | Month | Day

Date: Year | Month | Day

Value dbA

Pre- and Post calibration methods

Instrument Serial Number

Description of device

Manufacturer's Name

Manufacturer's Address

MEDDAC (FT MEADE) 1 MAY 95 **FORM 610-R**