

This document shall accompany shipments

1. Purchase Order # & Supplement #:	
2. Supplier ID #:	
3. Supplier:	
4. City:	State:

5. Hull Code(s)	6. DSS-SOC <input type="checkbox"/> Yes <input type="checkbox"/> No
8. Check one: <input type="checkbox"/> D320 <input type="checkbox"/> D420	

7. Ship to: <input type="checkbox"/> Quonset Point, RI (EB) <input type="checkbox"/> MY Groton, CT (EB) <input type="checkbox"/> NNS, VA (HII-NNS) <input type="checkbox"/> Other: _____
OK to Ship: Yes <input type="checkbox"/> No <input type="checkbox"/> If No, See Remarks Section for explanation

P. O. Item #	Mat'l Level/CAT	Part Number/ Material Description	Dwg./Spec. - Rev.	Heat# /Lot# / Trace# /Serial#	Quantities		Inspection Instructions (RI)	Disposition Code
					Accepted	Rejected*		

* See Source Inspection Notice

VPAR #	Process Name	Approval Date	VPAR #	Process Name	Approval Date

VIR #	Close Date	VIR #	Close Date

REMARKS: _____

** SDI signature signifies material has been inspected and accepted on behalf of EB Inspection

SDI Signature/Date: ** _____ PRINT NAME: _____	EB Source Inspector Signature/Badge/Date: _____ PRINT NAME: _____	EB Supplier Quality Supervisor Signature/Date: _____ PRINT NAME: _____
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DISPOSITION CODES: A = ACCEPT & FINAL RELEASE for SHIPMENT R = REJECT FINAL IPA = IN -PROCESS ACCEPT IPR = IN-PROCESS REJECT HR = HOLD FOR RESOLUTION

**SOURCE DELEGATED INSPECTION REPORT
(SDIR)**

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SDIR #: _____

Sheet: _____ of _____

Continuation Sheet

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