(01-94) PROJECT REGISTRATION AND APPROVAL REQUEST (See attached instructions for completing this form.)		DMB Control No. 1910-0900 DMB Burden Disclosure Statement on Attachment	
TO: DOE Technical Standards Program Office c/o Performance Assurance Project Office P.O. Box 2009, Bldg. 9201-3 Oak Ridge, TN 37831-8065		2. FROM:	
3. PROJECT NUMBER 4. AREA/FSC NUMBER SUB	DOCUMENT IDENTIFIER	5. DOCUMENT TITLE	
		DEVIEW INTEREST	
5 A	(Add appropriate field offices, laboratories, etc.)		
R A E C			
	YR MO YR P E E E E E	F F H L N R N E W N	
13. SCOPE AND PURPOSE OF PROJECT (List committee	inembers if known)		
14. AUTHOR/COMMITTEE CHAIR	h TELEDHONE NUMBER	15. APPROVED	h DATE SICNED
a. PRINTED OR TYPED NAME	b. TELEPHONE NUMBER	a. SIGNATURE	b. DATE SIGNED