

MARINE CORPS INSTALLATIONS EAST MARINE CORPS BASE CAMP LEJEUNE AHML APPROVAL REQUEST



Completed By MCIEAS	T-MCB CAMLEJ/G-4/RCRS	AHML Request Number:	
Unit Identification		1	[]
Major Command:		Building:	
Unit Name:		Phone Number:	
Unit Point of Contact:			
Product Identification			
Product Name:			
Manufacturer:			
Part Number:		Container Size:	
NSN or Product Number:		Container Type:	
MIL-SPEC Number:		Product State:	
Unit of Issue:		Container Pressure:	
Kit Identification:	□ N	Estimated Storage Qty:	
	ation (i.e. technical order or other justification)		
Certification			
ECO/AECO Certification: I requests.	certify that I have physically reviewed the abo	ve material and that it is in co	mpliance with command hazardous material
Printed Name/Rank:		Signature:	
E-mail:		Date:	
ECC/AECC Certification: I	certify that this form is complete, accurate, an	d ready for submission to the	EMD/RCRS.
Printed Name/Rank:		Signature:	
E-mail:		Date:	
Questions/Comments: Contact RCRS Military Liaison @ 910-451-1482 MCIEAST-MCB CAMLEJ/G-F/EMD/17 (4/13) PREVIOUS EDITIONS ARE OBSOLETE ADOBE 9.0			