

AMC EXPLOSIVES FACILITY LICENSE

(For use, see: AMC-R 385-10)

This form is primarily used for the Arms Room license but can be used as a facility license when operationally reducing the Net Explosive Weights (NEW) from a DDESB approved site plan. Use the DA Form 7632 (page 3) as the interim license for those locations that are being used without a DDESB approved site plan but require one.

LOCATION NAME:	LICENSE #:	ISSUE DATE:
AE FACILITY LOCATION: <input style="width:350px" type="text"/>	IS THIS AN ARMS ROOM?	YES <input type="radio"/> NO <input type="radio"/>
FACILITY PHYSICAL SECURITY CONTRUCTION STATEMENT EXPIRATION:		<input style="width:100px" type="text"/>
HAS COMMANDER/APPROPRIATE DESIGNEE SIGNED RISK ASSESSMENT?		YES <input type="radio"/> NO <input type="radio"/>
LEVEL OF RISK: (When approved site plan does not exist)		<input style="width:100px" type="text"/>
IS THE APPROPRIATE FIRE SYMBOL POSTED?		YES <input type="radio"/> NO <input type="radio"/>
COMPLIANCE WITH QD AND COMPATIBILITY CRITERIA IS NOT REQUIRED FOR MISSION SEESENTAL OR OPERATIONAL REQUIRED QUANTITIES OF HD 1.4 AND 6.1 (EXCLUDING TOXIC CHEMICAL MUNITIONS) STORED IN ARMS ROOMS.		
*SUBSTITUTE/INTERCHANGE OF DODICS AUTHORIZED IAW CURRENT CONVENTIONAL AE S/I LIST CIRCUMSTANCES MAY DRIVE THE NEED TO STORE TRAINING AE IN ARMS ROOMS UNTIL PROPER TURN-IN CAN BE MADE. IN THESE CASES: TRAINING AE WILL BE SEGREGATED. LIMITED TO 50LBS 1.2.2, 100LBS 1.3, AND 100LBS 1.4. WHEN 1.2.2 IS STORED, APPROPRIATE FRAGMENT BARRIERS MUST BE IN PLACE. TRAINING AE WILL BE STORED IN ARMS ROOMS IAW SC ESMP DURATION RESTRICTIONS.		
CEREMONIAL AE (1.3/1.4 BLANK) WILL BE CALCULATED TOWARDS 100LB 1.3 LIMIT.		
EXPLOSIVES FACILITY STORAGE LIMITS (Unit of Measure: <input style="width:50px" type="text"/>) *Must have DDESB approved site plan.		

HC/D	LIMITING EXPOSED SITE	TYPE OF DISTANCE	REQUIRED QD	ACTUAL SEPERATION	AUTHORIZED NEW
1.4					
1.3					
1.2.3					
1.2.2					
1.2					
1.1					

*1.5 AND 1.6 WILL BE CALCULATED IAW APPLICABLE DA PAM AND/OR DOD REQUIREMENTS

NOTES: (Continue on back)

ANALYST: NAME: TITLE: CONTACT #:

REVIEW/CONCURRENCE (CO, PHYSICAL SECURITY, QASAS, FIRE, SAFETY, AND SO FORTH)

ORGANIZATION	PRINTED NAME	SIGNATURE	CONCUR

APPROVER: NAME: TITLE: SIGN:

ANNUAL REVIEW

YEAR:

ORGANIZATION	PRINTED NAME	SIGNATURE	CONCUR

YEAR:

ORGANIZATION	PRINTED NAME	SIGNATURE	CONCUR

YEAR:

ORGANIZATION	PRINTED NAME	SIGNATURE	CONCUR

YEAR:

ORGANIZATION	PRINTED NAME	SIGNATURE	CONCUR