

P XXXXXXXZ XXX XX

FM (UNIT receiving discrepancy report)

TO CCGDTHIRTEEN SEATTLE WA//DPW/DRMC//

INFO (Primary servicing UNIT as appropriate)

(Secondary servicing UNIT as appropriate)

(SECTOR/GROUP/STATION as appropriate)

BT

UNCLAS //N16519//

SUBJ: BRIDGE DISCREPANCY

1. FULL BRIDGE NAME

A. DISCREPANCY: (LIGHTS EXTINGUISHED, CLOSED, REDUCED OPERATION, ETC...).

B. WATERWAY/MILE MARKER:

C. OBSERVED BY: (NAME, COMPANY/UNIT, and phone number).

D. AMPLIFYING INFORMATION: (Any information that may be of value to responding unit ie...apparent cause of discrepancy, hours of operation, dates closed, etc.).

E. REQUEST BNM.

2. FULL BRIDGE NAME (If more than one BRIDGE discrepancy to report).

BT

NNNN

NOTE: TEXT IN **BOLD** TYPE IS REQUIRED.