

# ECS Configuration Change Request

<b>CCR No.</b> 97-0108A	<b>Logged Date</b> 2/12/97	<b>Rev.</b> A	<b>Request Type</b> CCR
<b>Priority</b> Routine <input checked="" type="checkbox"/> Urgent <input type="checkbox"/> Emergency <input type="checkbox"/>	<b>Affected Release</b> B		<b>Change Class</b> II
<b>Title (description)</b> Reconcile the RTM IRD class with the ASTER IRD document			
<b>Documents Affected</b>		<b>Source Nos (RID, NCR, Action Item, GSFC CCR, etc.) or Tech Reference</b> ASTER IRD 505-41-18(-001/-002/-003) ECS CCB Action Item 97-0006	
<b>RTM Change</b> <input checked="" type="checkbox"/> <b>Start New Baseline</b> <input type="checkbox"/>			
<b>Problem</b>  Requirement changes have been made to the ASTER Interface Requirements Document. These changes need to be applied to RTM.			
<b>Proposed Solution</b>  Make the required additions, deletions, and modifications to the ASTER IRD and RBR requirements. (See attached tables 1 & 2). Make L4 changes as necessary in attached table 3 (included in this Rev. A version of the CCR).			
<b>Impact Analysis:</b>			
Organizations Affected:	BOO <input type="checkbox"/>	Contracts <input checked="" type="checkbox"/>	ECS Chief Eng <input checked="" type="checkbox"/>
Procurement <input type="checkbox"/>	QO <input checked="" type="checkbox"/>	Rel. Dev <input checked="" type="checkbox"/>	Rel. A <input type="checkbox"/>
Science Off <input type="checkbox"/>	Security <input type="checkbox"/>	Subcontract <input type="checkbox"/>	Sys. Eng <input checked="" type="checkbox"/>
			FOS <input checked="" type="checkbox"/>
			Rel. C <input type="checkbox"/>
			Sys Verf Acpt <input checked="" type="checkbox"/>
			M&O <input type="checkbox"/>
			SCDO Arch. <input type="checkbox"/>
<b>Cost:</b>	None <input type="checkbox"/>	Small <input type="checkbox"/>	Medium <input type="checkbox"/>
		(Not exceeding \$100,000)	(\$100,000 to \$500,000)
			Large <input type="checkbox"/>
			(Over \$500,000)
<b>Schedule:</b>	None <input checked="" type="checkbox"/>	Other	
Additional LOC _____	Man-Months _____		
Materials _____			
<b>Originator</b> <u>Monica Johnson</u>	<u>(signed) Monica Johnson</u>		<u>1/29/97</u>
	Signature		Date
<b>Office</b> <u>SMO</u>	<b>Office Manager</b> <u>(signed) James LeFebvre</u>	<u>1/29/97</u>	
	Signature	Date	
<b>Disposition</b>	Approved <input checked="" type="checkbox"/>	Approved w/Comment <input type="checkbox"/>	Forward <input type="checkbox"/>
			Disapproved <input type="checkbox"/>
<b>Comments:</b>			
	<b>CCB Chairperson</b> <u>(signed) Paul Fingerman</u>	<u>2/12/97</u>	
	Signature	Date	