

# Infrastructure Booking Advice (IBA)

(In accordance with Rule 3015 Infrastructure Booking Advice.)

	Advice No. <input style="width:90%;" type="text"/>	Time <input style="width:80%; text-align:center;" type="text" value="00:00"/>	Date <input style="width:80%; text-align:center;" type="text" value="dd/mm/yyyy"/>	
<input type="checkbox"/>	Previous IBA No. <input style="width:90%;" type="text"/>	Dated <input style="width:80%; text-align:center;" type="text" value="dd/mm/yyyy"/>	Cancelled <input style="width:80%; text-align:center;" type="text" value="dd/mm/yyyy"/>	
Location <input style="width:95%; text-align:center;" type="text" value="Location Identifier"/>				
between <input style="width:30%; text-align:center;" type="text" value="Location"/> and <input style="width:30%; text-align:center;" type="text" value="Location"/> station				
Special Train Notice No. <input style="width:15%; text-align:center;" type="text" value="STN No."/> Dated <input style="width:15%; text-align:center;" type="text" value="dd/mm/yyyy"/>				
<b>Equipment details</b>				
ID Number	Description	Certification	FARF No.	
		Y/N		
		Y/N		
		Y/N		
		Y/N		
		Y/N		
<b>Booking-Out Confirmation</b>				
We certify that in accordance with Special Train Notice No. <input style="width:15%; text-align:center;" type="text" value="STN No."/> dated <input style="width:15%; text-align:center;" type="text" value="dd/mm/yyyy"/> the equipment listed above is now:				
<input type="checkbox"/> Temporarily out of use <input type="checkbox"/> Permanently removed				
Division	Time	Date	Name	Signature
Infrastructure				
Network Control				
<b>Booking-In Confirmation</b>				
We certify that the equipment detailed above is operating correctly and is now:				
<input type="checkbox"/> Back in service and fit for purpose <input type="checkbox"/> commissioned for use in accordance with				
Special Train Notice No. <input style="width:15%; text-align:center;" type="text" value="STN No."/> dated <input style="width:15%; text-align:center;" type="text" value="dd/mm/yyyy"/>				
Division	Time	Date	Name	Signature
Infrastructure				
Network Control				
<input type="checkbox"/> New IBA No. <input style="width:15%; text-align:center;" type="text" value="Form No."/> Dated <input style="width:15%; text-align:center;" type="text" value="dd/mm/yyyy"/> Signed <input style="width:40%; text-align:center;" type="text" value="Signature"/>				