

FILE FOLDER

DESCRIPTION ON TAB:

202

J.O. Comp



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TAB PLACEMENT HERE

DESCRIPTION:

J.O. CARD



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BLDG CLASS 2 PROPERTY RECORD
 (004) UIC..M67001 (001) PR NO.....2-03966
 MCB CAMP LEJEUNE NC (005) FACILITY NO..202
 (106) SPEC AREA....DA
 HADNOT POINT

LOCATION
 (101) COUNTRY..US UNITED STATES
 (102) STATE....37 NORTH CAROLINA
 (103) COUNTY...133 ONSLOW
 (104) CITY.....0735 CAMP LEJEUNE
 (105) AC.....05
 (107) MAP GRID.9K

GENERAL INFORMATION
 (007) ACTION.....CAP-IMPROV
 (008) FAM HOUSING....NO
 (009) EE DATE.....08 OCT 81
 (011) PR REVIEW DATE.08 OCT 81
 (010) FACILITY NAME..
 BEQ E1-E4

ACQUISITION
 (201) ESTATE.....13 OTHER MIL FUND
 (202) ACQ CONTRACT...NOY4750
 (203) ACQ DATE.....01 AUG 42
 (204) GOVT COST..... \$251,728
 (207) LAND CCN.....91140

MEASUREMENTS
 (301) LENGTH.... 157 FT
 (302) WIDTH..... 145 FT
 (303) HEIGHT.... 24 FT
 (304)/AREA..... 26,602 SF
 (308) AREA UM...
 (305) STORIES... 02
 (307) IRREGULAR. YES

CONSTRUCTION
 (401) YEAR BUILT.....1942
 (402) CONSTRUCTION TYPE..PERMANENT
 (403) YEAR IMPROVED.....

(404) ABMP CODE.....
 (409) PROJECT NO.....
 (410) HISTORIC IND...

MAINTENANCE
 (701) MAINT UIC..M67001 (702) PRIME USE....72111 (703) MFC...4 USMC

STATUS / MAX OCCUPANCY
 (502) CATEGORY CODE...61073 (501) USE..COMPANY BATTERY HQ (MARCOR)
 (510) USER UIC.....M67001.....MCB CAMP LEJEUNE NC

	AREA/SF*	OTHER/	ALT/	DEF CODES
ADEQ(515)		(516)	(517)	(524)
SBST(518).....	1,624.00	(519)	(520)	(525)A30 B04 B26
INAD(521)		(522)	(523)	(526)
TOTAL	1,624.00			

TOTAL

1,654.00

IND(51)

(52)

(53)

(56)

282(518).....1,654.00 (51)

(51)

(50)

(55)A30 B04 B56

AD(515)

(516)

(517)

(54)

AREA\S*

OTHER\

ALT\

DEF CODES

(510) USER UIC.....M7001.....MCR CAMP-LEJUNE NC

(505) CATEGORY CODE.....61073

(501) USE.....COMPANY BATTERY HQ (MARCOR)

(701) MAINT UIC..M7001

(702) PRIME USE.....75111

MAINTENANCE

(703) MFC....4 USMC

(403) YEAR IMPROVED.....

(402) CONSTRUCTION TYPE..PERMANENT

(409) PROJECT NO.....

(401) YEAR BUILT.....1945

CONSTRUCTION

(507) LAND CN.....9140

(504) GOVT COST.....\$251,758

(503) ACQ DATE.....01 AUG 45

(502) ACQ CONTRACT.....NDY4750

(501) ESTATE.....13 OTHER MIL FUND

(107) MAP GRID..JK

(102) AC.....07

(104) CITY.....0735 CAMP LEJUNE

(103) COUNTY.....133 DUSLOW

(102) STATE.....37 NORTH CAROLINA

(101) COUNTRY..US

UNITED STATES

L O C A T I O N

HADNOT POINT

(106) SPEC AREA....DA

(105) FACILITY NC..205

(101) PR NO.....2-0396

BLDG

CLASS 2 2

PROPERTY RECORD

C E N S U S

(107) ACTION.....CAP-IMPROV

(108) PLAN HOUSING.....NO

(109) EE DATE.....08 OCT 81

(101) PR REVIEW DATE..08 OCT 81

(1010) FACILITY NAME..

BEG EI-E4

M E A S U R E M E N T S

(301) LENGTH.....

(302) WIDTH.....

(303) HEIGHT.....

(304) AREA.....26,602 SF

(308) AREA UM.....

(305) STORIES.....05

(307) IRREGULAR..YES

BLDG

C L A S S 2 P R O P E R T Y R E C O R D
(C - O - N - T - I - N - U - A - T - I - O - N)

(004) UIC..M67001
MCB CAMP LEJEUNE NC

(001) PR NO.....2-03966
(005) FACILITY NO..202
(106) SPEC AREA....DA
HADNOT POINT

(502) CATEGORY CODE...72111 (501) USE..UEPH E1/E4

(510) USER UIC.....M67001.....MCB CAMP LEJEUNE NC

	AREA/SF	OTHER/PN*	ALT/	DEF CODES
ADEQ(515)		(516)	(517)	(524)
SBST(518).....	24,978.00	(519).....	164.00	(520)
				(525)A30 B04 B26
INAD(521)		(522)	(523)	(526)
TOTAL	24,978.00		164.00	

BLDG

C L A S S I F I C A T I O N P R O P E R T Y R E C O R D
(C - D - N - T - I - N - U - A - T - I - O - N)

(004) UIC..M67001

MCB CAMP LEJUNE NC

(001) PR NO.....S-03966
(002) FACILITY NC..SOS
(106) SPEC AREA....DA
HADNOT POINT

(502) CATEGORY CODE...V5111 (501) USE...LEPH EIVER

(510) USER UIC.....M67001.....MCB CAMP LEJUNE NC

DEF CODES

ALTY

OTHER VPM#

AREA SE

(524)

(517)

(516)

ADQ(512)

(525)A30 B04 B56

282(518).....24,978.00 (519).....164.00 (520)

(526)

(523)

(522)

INAC(521)

TOTAL 24,978.00 164.00

BLDG NO

INT. PAINT SQ FT

EXT. PAINT SQ FT

ROOF SQ FT

CONDEN. LINES LIN FT

FACILITY HISTORY RECORD

202

47,538

1500 sf 214 windows

MCBCL 11011/3

JOB ORDER NO	DATE COMPLETED	COST	DESCRIPTION
023-029/16-82			Renovation -signed 12/26/62
CONTRACT	c 3/10/66		Repaired head and shower facilities
CONTRACT	C 4/16/63		Exterior painted
Contract	12/10/69		Exterior repairs & paint
3884	8-17-73		Issue lite globes
2705	12-17-74	402	Install 115v. except for gas dryer & install ^{vents}
3745	2-17-78	4799	Issue paint self help
4718	11-28-80	270	Install 30 Amp disconnect above existing light panel
4718	12-2-77	79	Replace contactors
3084	11-28-80	270	Install 30 amp, Disconnect above existing lines
3915	8-7-81	630	Rpl. pumps on condensate Receiver
4032	Comp	1655	Secure inspection panel covers in hallway
3190	3-17-82	2146	Repair INT.
3445	6-4-82	9525	STEAM LEAK CAUSED ADDITIONAL WORK
4242	8-27-82	231	REPR WATER BREAK IN 12" MAIN
3815	11-5-82	2491	Remove & Replace Fluores. Lt. Fixtures
cool	9-4-85	14,940	Perform cyclic maint Repairs
6807	Comp	3075	Perform recurring cyclic maint to Bldg
6807	Comp	3011	Perform recurring cyclic maint to Bldg
3027	5-17-85	670	REFIT Doors, Rpl. Doors Repair Plaster Repair Plumbing
4016	11-16-89	1871	Rpl window screen complete
3182	Comp	6895	Remove Asbestos BRDS & PLASTER ceilings
1158	3-30-90	6041	Install Mini Blinds, 1st & 2nd Decks.
1154	4-30-91	565	PROVIDE ADDITIONAL LIGHTING IN TEST AREA. Purged 11-Sep 01
3718	7-1-91	429	REMOVE COMMODOE STALL MEN'S HEAD.
8032	—	194	INSTALL GRAB BARS /Purged Sept 11, 01
3722		6669	Repair office Area & floor - Purged 9-11-01

TAB PLACEMENT HERE

DESCRIPTION:

Work Req.

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WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>26945</i>	
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>08 May 2003</i>	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START	
6. FOR FURTHER INFORMATION CALL <i>Ron White 3091</i>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Fabricate three keys for room 202 (AA32) for Bldg 202, Lifelong Learning Management/Others.

45
03-83104

'03 MAY 12 AM 7:22

9. FUNDS CHARGEABLE

APF

10. SIGNATURE (Requesting Official)

Daniel L. Parker

PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.	
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
b. Material	\$		
c. Overhead and/or Surcharge	\$		
d. Equipment Rental/Usage	\$		
e. Contingency	\$		
f. TOTAL	\$	16. SIGNATURE	17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		22. DATE	
21. SIGNATURE			

(See Part IV on Reverse Side)



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1

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WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>26761</i>
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>28 April 2003</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Sgt Cooper 451-3091</i>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Replace broken commode seat in men's restroom on second deck at Bldg 202, Lifelong Learning Management/Others.

61

03-78538

'03 APR 29 AM 9:54

PPB

9. FUNDS CHARGEABLE <i>ANF</i>	10. SIGNATURE (Requesting Official) <i>David L. Parker</i>
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PART II—COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS		
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		22. DATE		
21. SIGNATURE				



5/11

24/11

2/11

WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
Supersedes NAVDOCKS 2351

(PW Department see Instructions
in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>26210</i>
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>19 March 2003</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Ron White 451-3091</i>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

6. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Fabricate three keys for room 218 at Bldg 202, Lifelong Learning Management/Others.

45

03 MAR 20 AM 7:48

03-64889

9. FUNDS CHARGEABLE <i>ATF</i>	10. SIGNATURE (Requesting Official) <i>Paris L. Parker</i>
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PART II—COST ESTIMATE
(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____ IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	
16. SIGNATURE		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		22. DATE	
21. SIGNATURE			

(See Part IV on Reverse Side)



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WORK REQUEST ROUTING SLIP 202

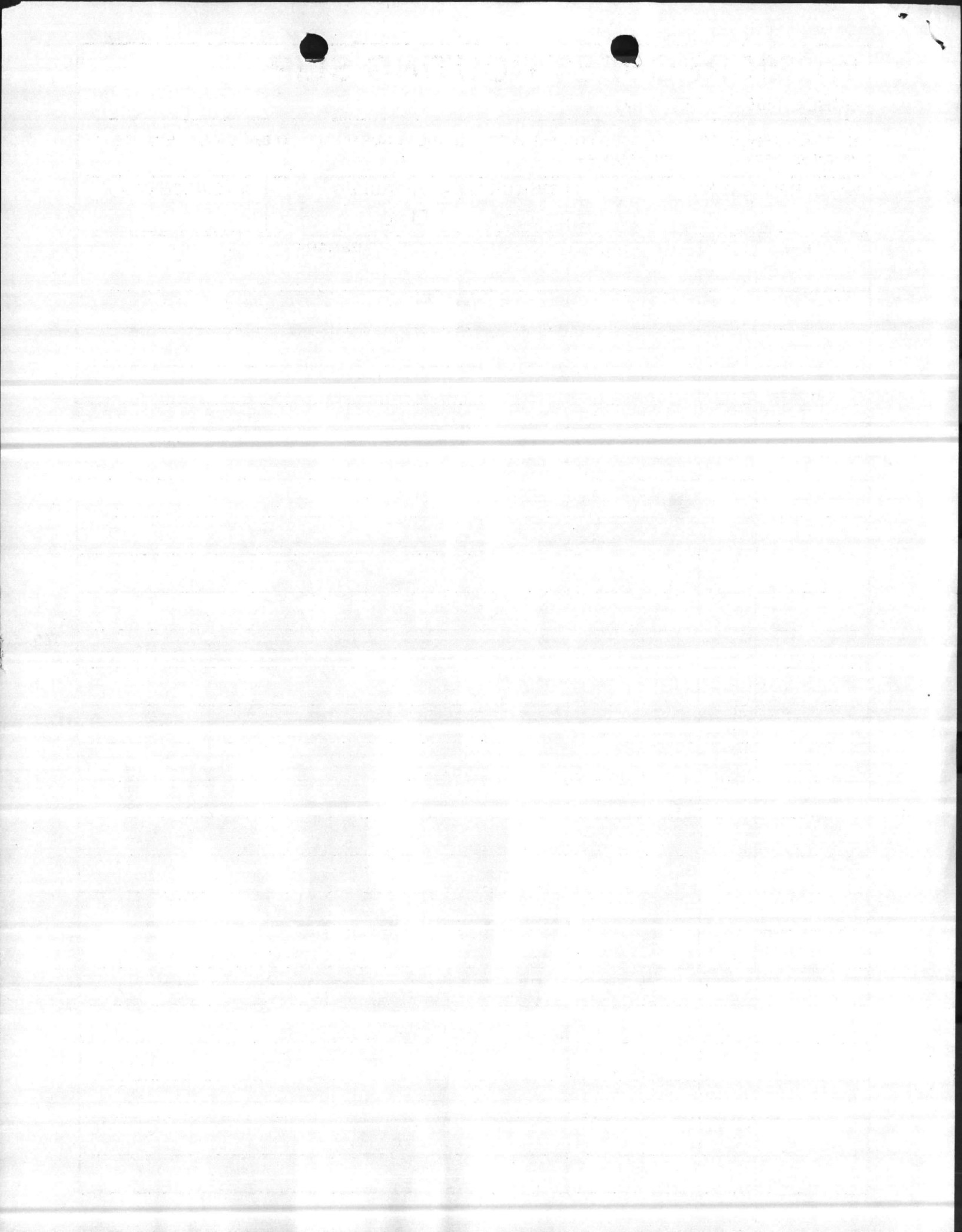
MCBCL 4400-46 (REV. 2-91)

THIS WORKSHEET MUST BE USED FOR ALL WORK REQUEST SUBMITTED TO BASE MAINTENANCE WORK RECEPTION, CAMP LEJEUNE

WORK REQUEST NO. <u> B062</u> <u> 25677</u>	SKETCH / PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE RECEIVED <u> 2-14-03</u>
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ACTION	IN	OUT	INITIAL	REMARKS
<u>Review</u>	<u>2/14</u>		<u>SC</u>	<u>03-50424</u>
<u>Shul</u>				<u>ticket 20</u>
<u>Henry</u>				

20



WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>	2. REQUEST NO. <i>25677</i>
3. TO <i>Base Maintenance Officer</i>	4. DATE OF REQUEST <i>13 February 2003</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Ron Wjite 451-3091</i>	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. It is requested that Bldg 202, Lifelong Learning Management/Other be exterminated for ants and bugs on the 1st and 2nd floor.

Review

03-50424

03 FEB 14 AM 7:41

9. FUNDS CHARGEABLE

ATF

10. SIGNATURE (Requesting Official)

[Signature]
D. L. Parker

PART II—COST ESTIMATE

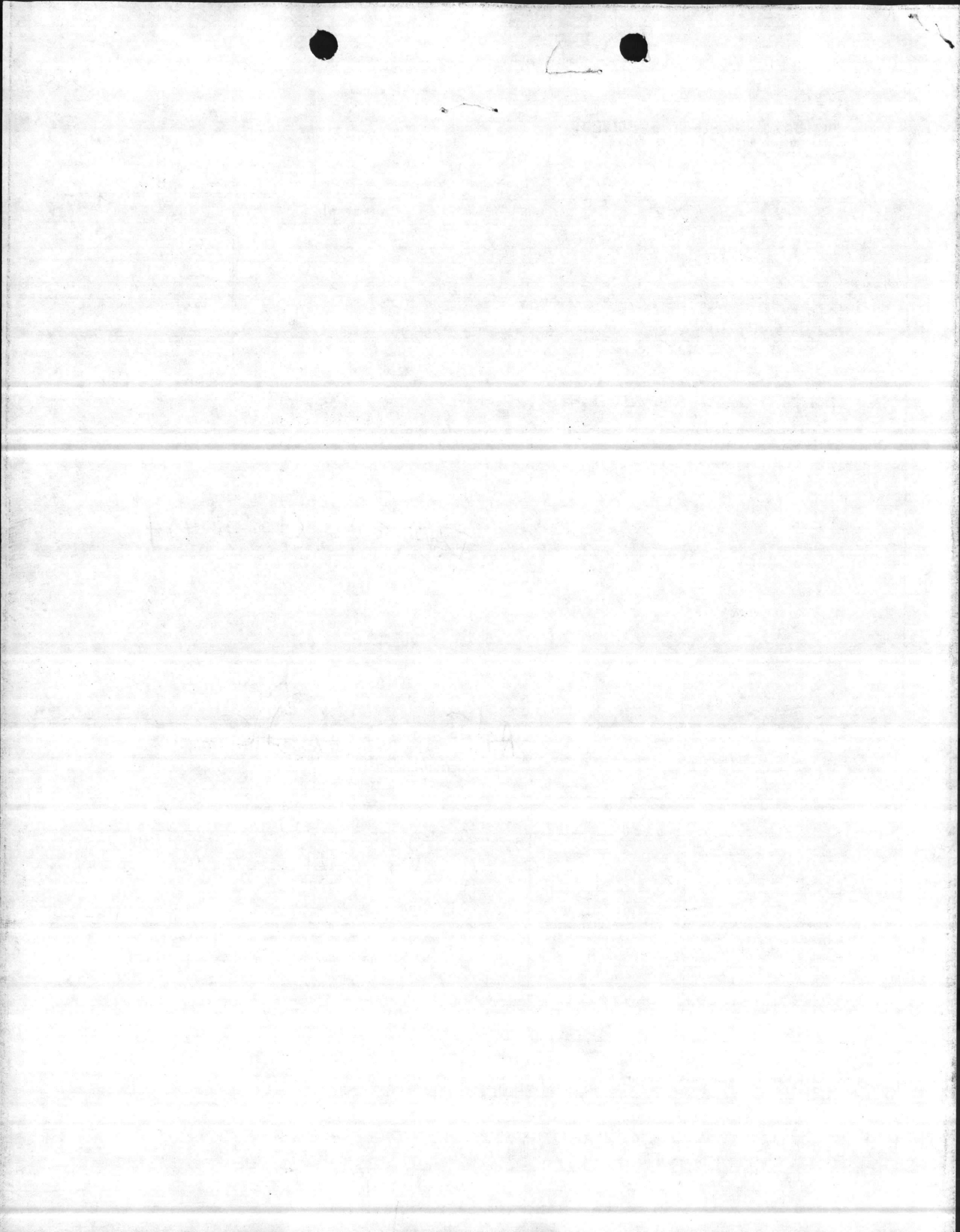
(Filled out by Maintenance Control Division if estimate requested)

11. TO:	12. ESTIMATE NO.
13. COST ESTIMATE	
a. Labor	\$
b. Material	\$
c. Overhead and/or Surcharge	\$
d. Equipment Rental/Usage	\$
e. Contingency	\$
f. TOTAL	\$
14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
16. SIGNATURE	17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:	19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
21. SIGNATURE	22. DATE	

(See Part IV on Reverse Side)



WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance	2. REQUEST NO. 25765
3. TO Base Maintenance Officer	4. DATE OF REQUEST 20 February 2003
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Ron White 451-3091	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Fabricate two sets of keys for the falcon door locks to room 109 and room 110 in Bldg 202, Lifelong Learning Management/Others. There is only one set of keys for each door.

03-52435

'03 FEB 21 PM 12:47

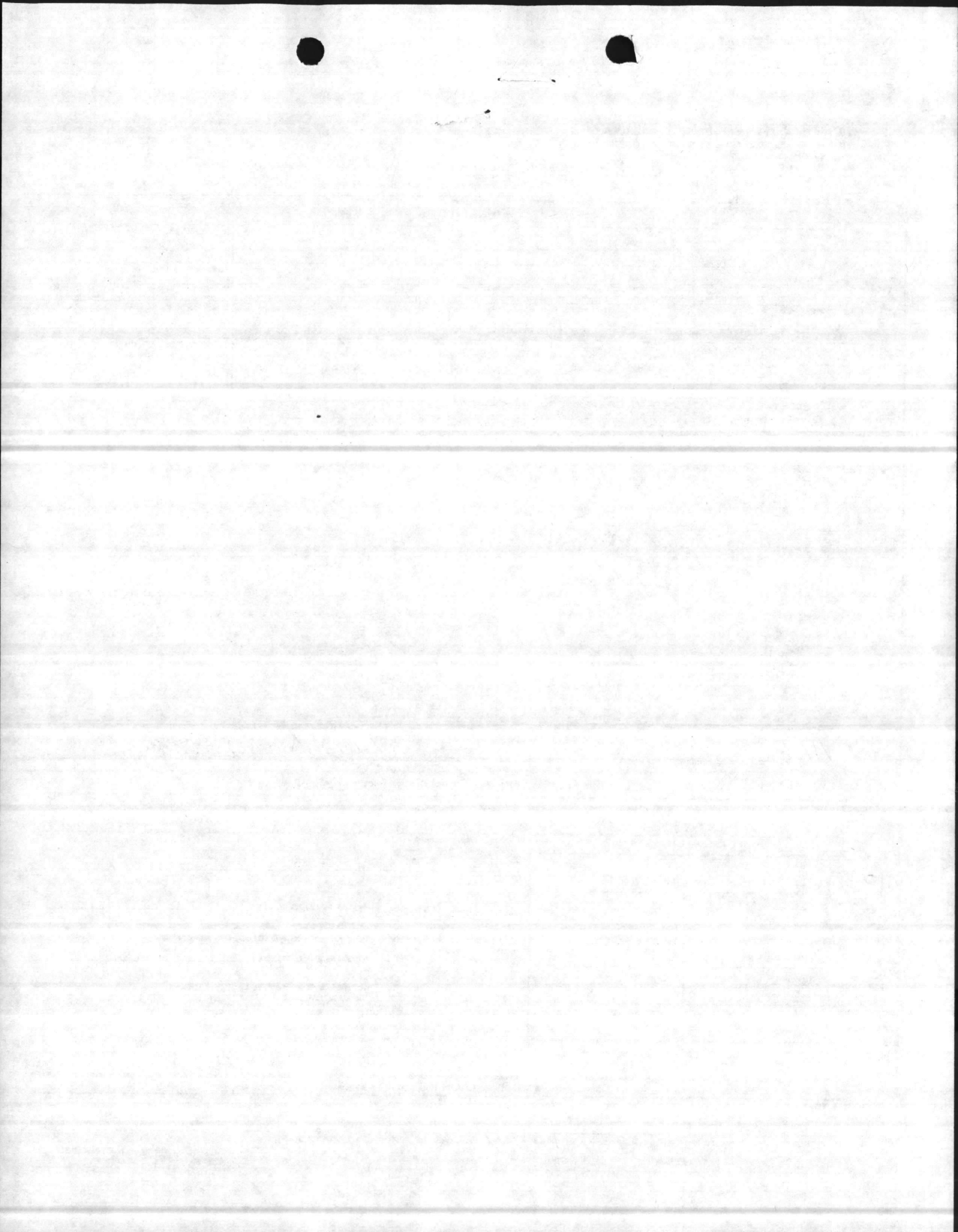
9. FUNDS CHARGEABLE APF	10. SIGNATURE (Requesting Official) <i>Doris Davidson Partridge</i>
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PART II—COST ESTIMATE
(Filled out by Maintenance Control Division if estimate requested)

11. TO:	12. ESTIMATE NO.												
13. COST ESTIMATE	14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO												
<table border="1"> <tr> <td>a. Labor</td> <td>\$</td> </tr> <tr> <td>b. Material</td> <td>\$</td> </tr> <tr> <td>c. Overhead and/or Surcharge</td> <td>\$</td> </tr> <tr> <td>d. Equipment Rental/Usage</td> <td>\$</td> </tr> <tr> <td>e. Contingency</td> <td>\$</td> </tr> <tr> <td>f. TOTAL</td> <td>\$</td> </tr> </table>	a. Labor	\$	b. Material	\$	c. Overhead and/or Surcharge	\$	d. Equipment Rental/Usage	\$	e. Contingency	\$	f. TOTAL	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
a. Labor	\$												
b. Material	\$												
c. Overhead and/or Surcharge	\$												
d. Equipment Rental/Usage	\$												
e. Contingency	\$												
f. TOTAL	\$												
	16. SIGNATURE												
	17. DATE												

PART III—ACTION (Filled out by Requestor)

18. TO:	19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
21. SIGNATURE		22. DATE



WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance		2. REQUEST NO. 24323	
3. TO Base Maintenance Officer		4. DATE OF REQUEST 7 November 2002	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START	
6. FOR FURTHER INFORMATION CALL Ron White 451-3091		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. It is requested that one fluorescent light ballast on the first floor, right side of Bldg 202, Consolidated Education Center be replaced.

02 NOV 8 PM 12:26

03-16066
41

9. FUNDS CHARGEABLE ATF	10. SIGNATURE (Requesting Official) David L. Parker
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PART II—COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.	
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
b. Material	\$		
c. Overhead and/or Surcharge	\$		
d. Equipment Rental/Usage	\$		
e. Contingency	\$		
f. TOTAL	\$	16. SIGNATURE	17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		22. DATE	
21. SIGNATURE			

1912

74A

WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
Supersedes NAVDOCKS 2351

(PW Department see Instructions
in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance		2. REQUEST NO. 24125
3. TO Base Maintenance Officer		4. DATE OF REQUEST 28 October 2002
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Ron White 451-3091		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

6. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Fabricate four keys for Bldg 202, Consolidated Education Center.

- a. AA 14 - two keys.
- b. AA 28 - two keys.

45
03-11834

02 OCT 29 AM 8:44

9. FUNDS CHARGEABLE APF	10. SIGNATURE (Requesting Official) <i>Dorothy Langley</i>
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PART II—COST ESTIMATE

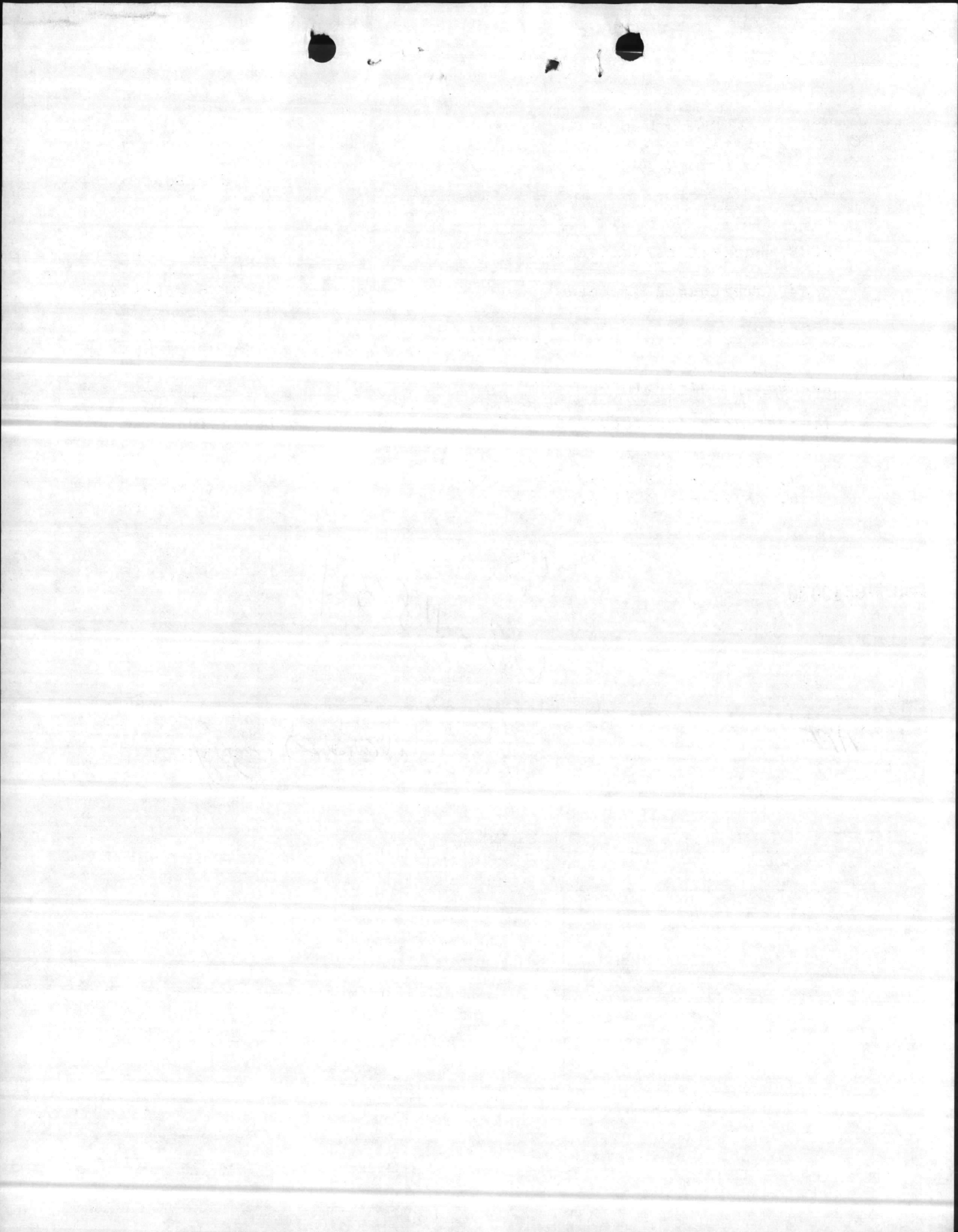
(Filled out by Maintenance Control Division if estimate requested)

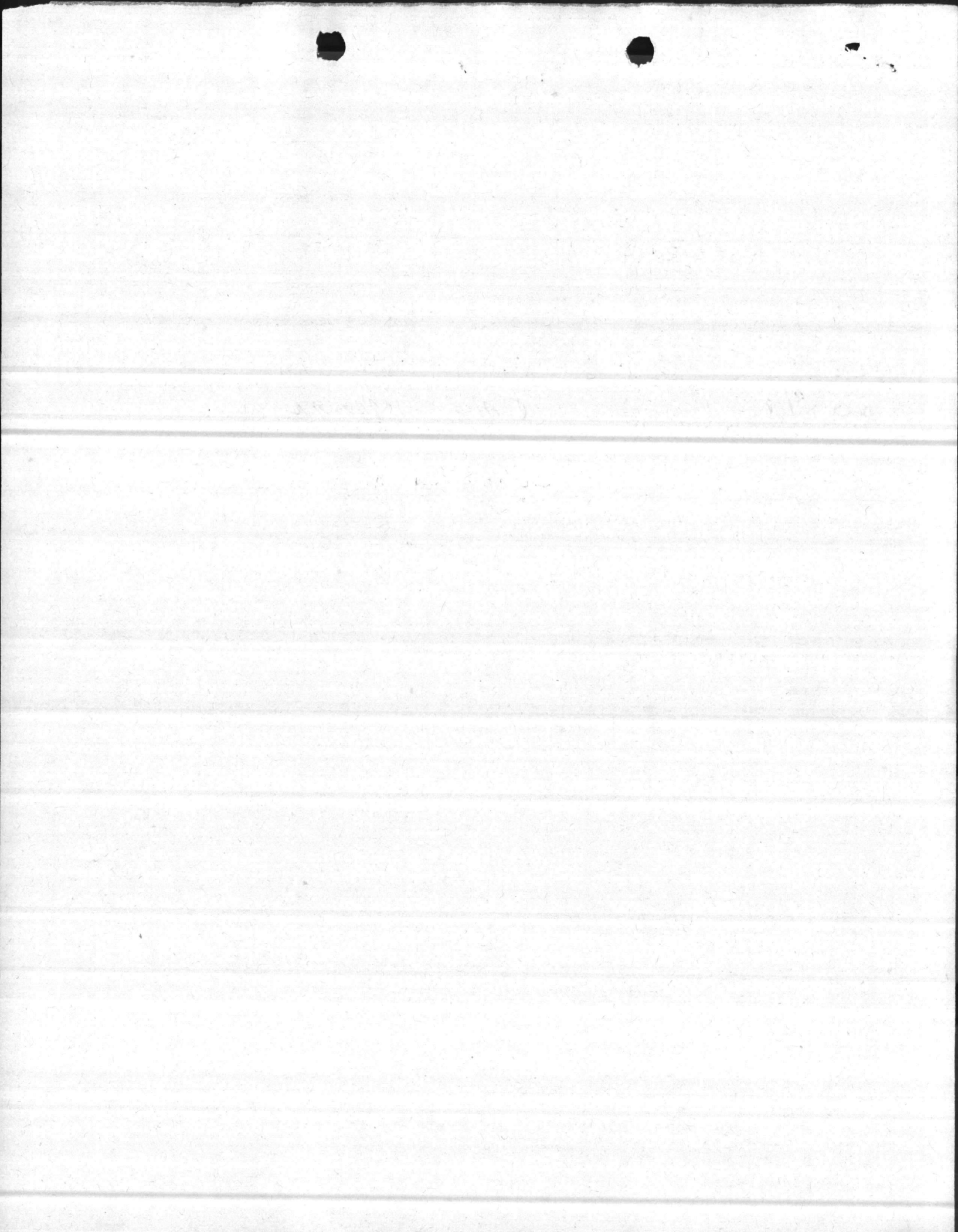
11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		21. SIGNATURE	
21. SIGNATURE		22. DATE	

(See Part IV on Reverse Side)





WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance	2. REQUEST NO. 23446
3. TO Base Maintenance Officer	4. DATE OF REQUEST 17 September 2002
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Ron White 451-3091	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. It is requested that the following discrepancies on Consolidated Education Center, Bldg 202 be repaired or replaced.

a. Request for two fire exit signs be replaced in room 109 and on the right side second floor. *PPF 41*

b. Request three water fountains with filters be installed. One on first floor left side and two on second floor. Note: The coolers are here on location but not the filters. *Rev*

c. Request duct work in room 201, due to this room divided into 3's, the room in the corner is hotter than the rest. *Rev*

02-179726

02-179727

02 SEP 18 AM 11:33

9. FUNDS CHARGEABLE

AAF

10. SIGNATURE (Requesting Official)

David I. Parker

PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:	12. ESTIMATE NO.
13. COST ESTIMATE	14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor \$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material \$	
c. Overhead and/or Surcharge \$	
d. Equipment Rental/Usage \$	
e. Contingency \$	
f. TOTAL \$	16. SIGNATURE
	17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:	20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	22. DATE
21. SIGNATURE	

Handwritten scribbles at the top of the page.

Handwritten text, possibly "1947-48".

Handwritten text, possibly "1947-48".

Handwritten text, possibly "1947-48".

Handwritten signature or name.

Handwritten signature or name.

WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

02-97857

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>19265</i>	
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>27 December 2001</i>	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START	
6. FOR FURTHER INFORMATION CALL <i>Ron White 451-3091</i>		7. SKETCH/PLAN ATTACHED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Request standing lights on Bldg 202, Consolidated Education Center be repaired or replaced.

- A. Rear of bldg, right side second floor, outside, one light.
- B. Front of bldg, right side first and second floors, outside, two lights.
- C. Front center of bldg, pole light not working proper.

*See attached diagram.

RECEIVED
 01 DEC 28 AM 9:44
 BASE MAINTENANCE
 OPERATIONS DIVISION

9. FUNDS CHARGEABLE <i>AF</i>	10. SIGNATURE (Requesting Official) <i>D. Parker</i>
----------------------------------	---

PART II—COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.	
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
b. Material	\$		
c. Overhead and/or Surcharge	\$		
d. Equipment Rental/Usage	\$		
e. Contingency	\$		
f. TOTAL	\$	16. SIGNATURE	17. DATE

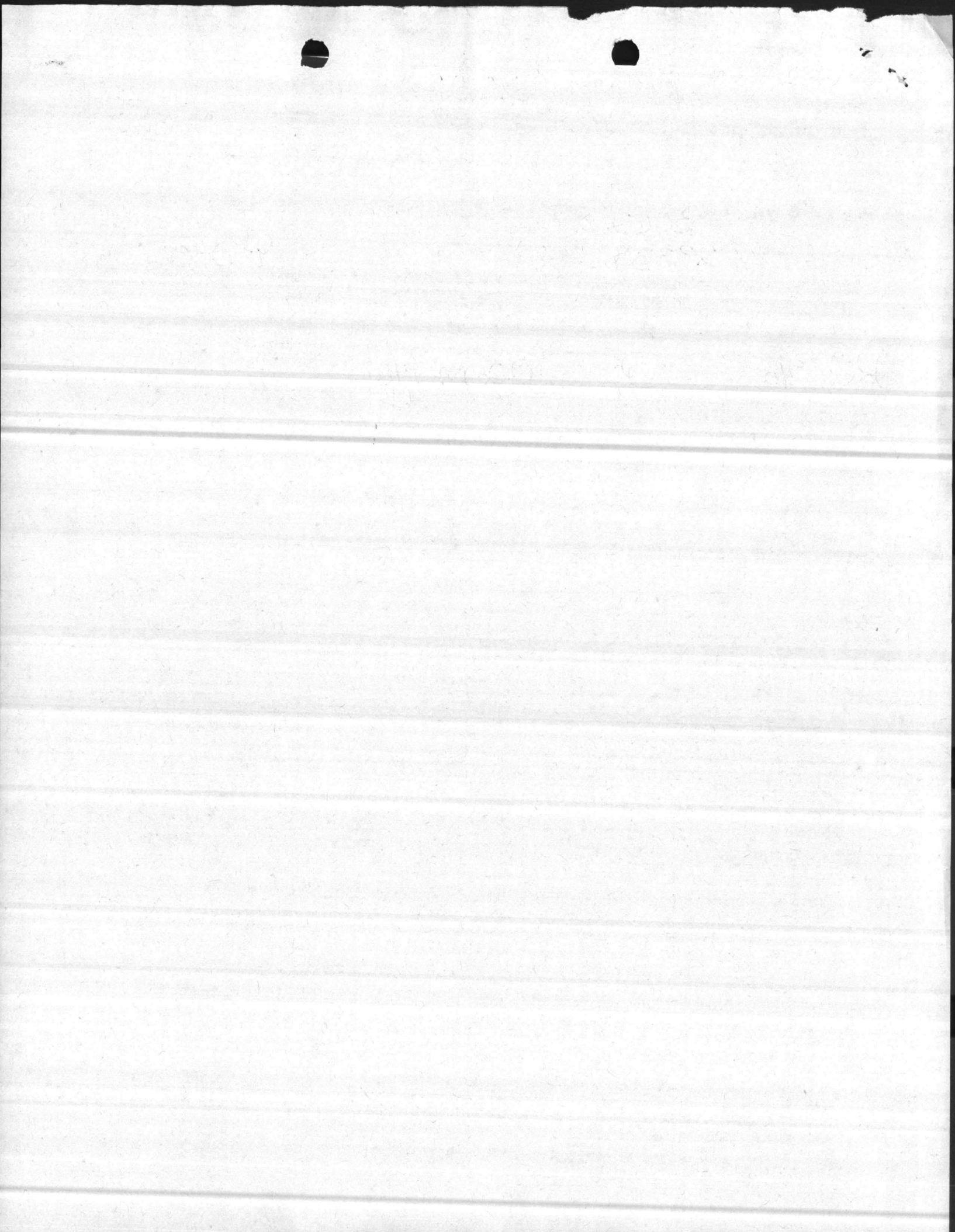
PART III—ACTION (Filled out by Requestor)

18. TO:		19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
21. SIGNATURE		22. DATE			

04-11-82

SECRET
OFFICE OF THE
DIRECTOR

CONFIDENTIAL



WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions
 in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <u>MCCS, Facilities/Maintenance</u>		2. REQUEST NO. <u>23338</u>
3. TO <u>Base Maintenance Officer</u>		4. DATE OF REQUEST <u>11 September 2002</u>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <u>Ron White 451-3091</u>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Request fire exit light be relocated, due to new duct work on the second floor right of Bldg 202, Consolidation Education Center.

REV 02177460

02 SEP 12 AM 9:25

9. FUNDS CHARGEABLE

APF

10. SIGNATURE (Requesting Official)

David L. Parker

PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		22. DATE
21. SIGNATURE		

(See Part IV on Reverse Side)

COPIED

19

1971

1971

WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
Supersedes NAVDOCKS 2351

(PW Department see Instructions
in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance		2. REQUEST NO. 23337
3. TO Base Maintenance Officer		4. DATE OF REQUEST 11 September 2002
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Ron White 451-3091		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Request four keys be made for room #103, key number AA 4 for the 1st floor center hallway at Bldg 202, Consolidation Education Center.

45 02177459

02 SEP 12 AM 9:25

9. FUNDS CHARGEABLE APF	10. SIGNATURE (Requesting Official) David L. Parker
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PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
21. SIGNATURE		22. DATE	

PART OF GO

24

24

24

WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance	2. REQUEST NO. 23132
3. TO Base Maintenance Officer	4. DATE OF REQUEST 29 August 2002
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Ron White 451-3091	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. It is requested that an LTI be made on the following water fountains that are unserviceable at Consolidated Education Center, Bldg 202.
 a. 1st floor left, serial no. 016502085 \$185.00 - cost
 b. 2nd floor left, serial no. 016502089 \$185.00 - cost
 c. 2nd floor right, serial no. 9032317554 \$185.00 - cost

Note: The above water fountains are Base Property, they are not water fountains from MCCS Property.

02-175535

02 SEP 6 PM 2:47

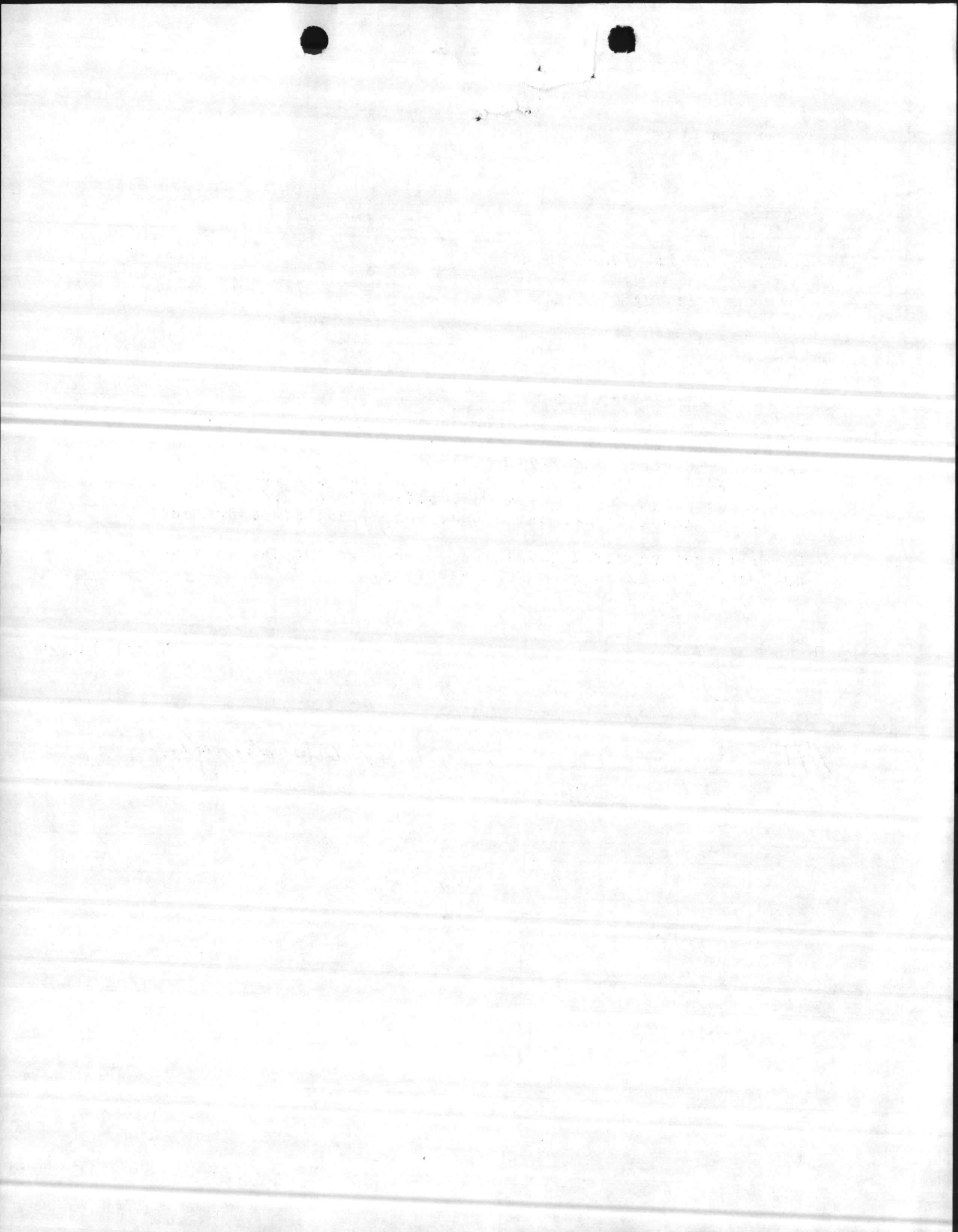
9. FUNDS CHARGEABLE HAF	10. SIGNATURE (Requesting Official) <i>David S. Baker</i>
----------------------------	--

PART II—COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

11. TO:	12. ESTIMATE NO.
13. COST ESTIMATE	14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor \$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____
b. Material \$	<input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF
c. Overhead and/or Surcharge \$	AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.
d. Equipment Rental/Usage \$	<input type="checkbox"/> DISAPPROVED. (See Reverse Side)
e. Contingency \$	16. SIGNATURE
f. TOTAL \$	17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:	19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
21. SIGNATURE	22. DATE	



WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance		2. REQUEST NO. 23109
3. TO Base Maintenance Officer		4. DATE OF REQUEST 28 August 2002
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Ron White 451-3091		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

02-172863

6. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. It is requested that the front right exit door at Bldg 202, Consolidated Education Center be repaired. This door can't be secure.

45

'02 AUG 29 AM 8:18

9. FUNDS CHARGEABLE APF	10. SIGNATURE (Requesting Official) D. Spangler
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PART II—COST ESTIMATE
(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		20. WORK REQUESTED <input checked="" type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
21. SIGNATURE				22. DATE	



RD

WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions
 in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance		2. REQUEST NO. 22812	
3. TO Base Maintenance Officer		4. DATE OF REQUEST 14 August 2002	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START	
6. FOR FURTHER INFORMATION CALL Ron White 451-3091		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

6. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. It is requested that the fire exit light in room 103 on the first floor center hallway at Bldg 202, Consolidated Education Center be repaired or replaced.

02-167565

41

'02 AUG 15 AM 9:04

9. FUNDS CHARGEABLE AAE	10. SIGNATURE (Requesting Official) David L. Parker
----------------------------	--

PART II—COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.	
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
b. Material	\$		
c. Overhead and/or Surcharge	\$		
d. Equipment Rental/Usage	\$		
e. Contingency	\$		
f. TOTAL	\$	16. SIGNATURE	17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
21. SIGNATURE		22. DATE			

10/10

10/10

Requester See Instructions on Reverse Side

PART I—REQUEST (Filled out by Requestor)

1. FROM
Consolidated Education Center

2. REQUEST NO.
BO-57

3. TO
Base Maintenance Office

4. DATE OF REQUEST
0193

5. REQUEST FOR
 COST ESTIMATE PERFORMANCE OF WORK

6. FOR FURTHER INFORMATION CALL
Ron White Ext 451-3091

7. SKETCH/PLAN ATTACHED
 YES NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Request to Safe open in the testing room of bldg 202

02-153 018
A5

F. FUNDS CHARGEABLE

[Signature]
Beavers Dir.

PART II—COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

11. TO

12. ESTIMATE NO.

12. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	
b. Material	\$	
c. Overhead and/or Surcharges	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	13.

13. APPROVED. PROGRAMMING TO START IN _____

APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____ IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.

DISAPPROVED. (See Reverse Side)

16. SIGNATURE

17. DATE

PART III—ACTION (Filled out by Requestor)

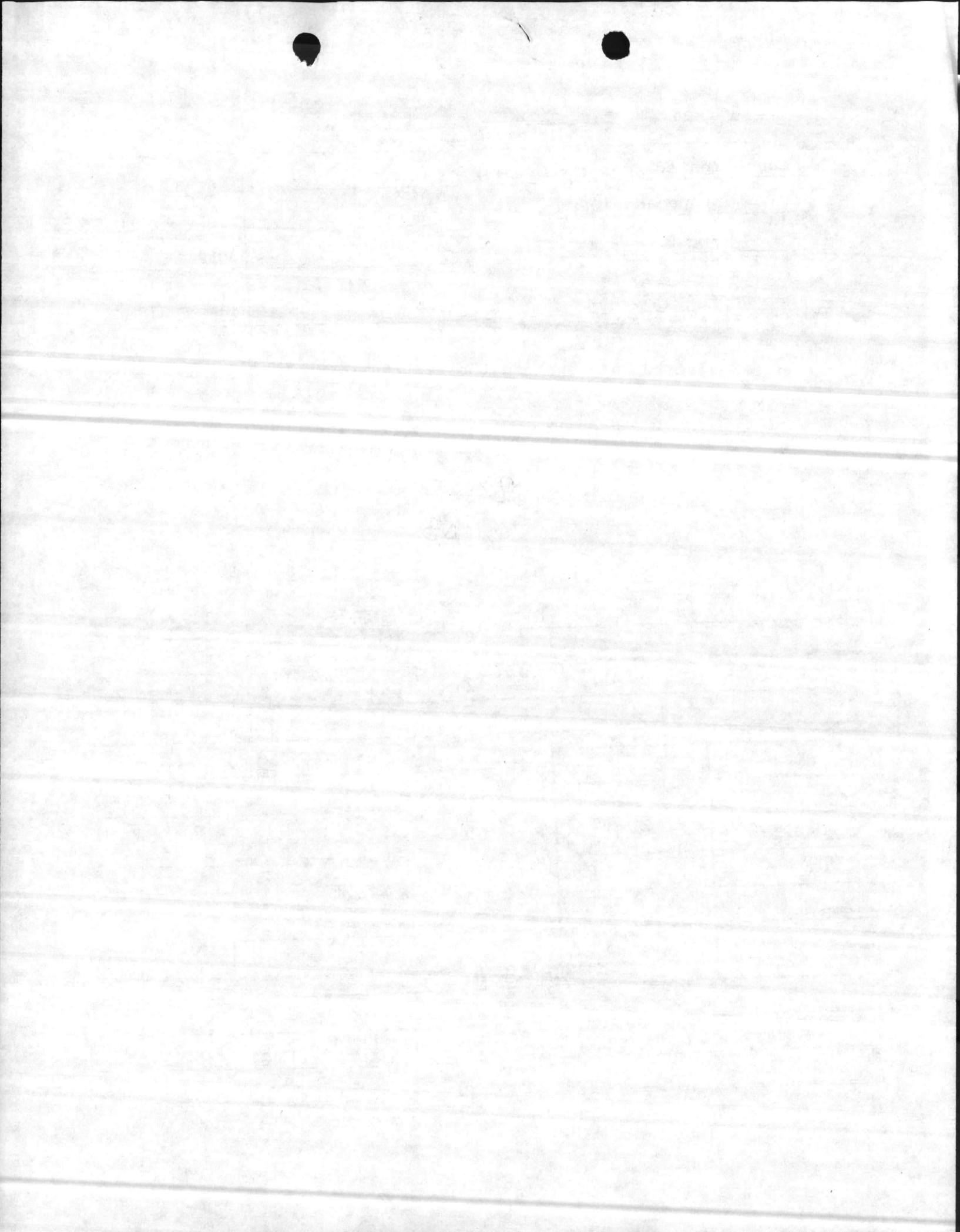
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PTV funds are involved)
 NAVCOMP 140 OTHER

20. WORK REQUESTED
 HAS BEEN CANCELLED HAS BEEN DEFERRED WILL BE PERFORMED BY OTHERS

21. SIGNATURE

22. DATE

(See Part IV on Reverse Side)



WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
Supersedes NAVDOCKS 2351

(PW Department see Instructions
in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>21591</i>
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>4 June 2002</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Ron White 451-3091</i>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. It is requested that the broken wall receptacle in room 203 on the second floor at Bldg 202, Consolidated Education Center be replaced. The receptacle is not working.

41
02-141285

02 JUN 5 AM 7:30

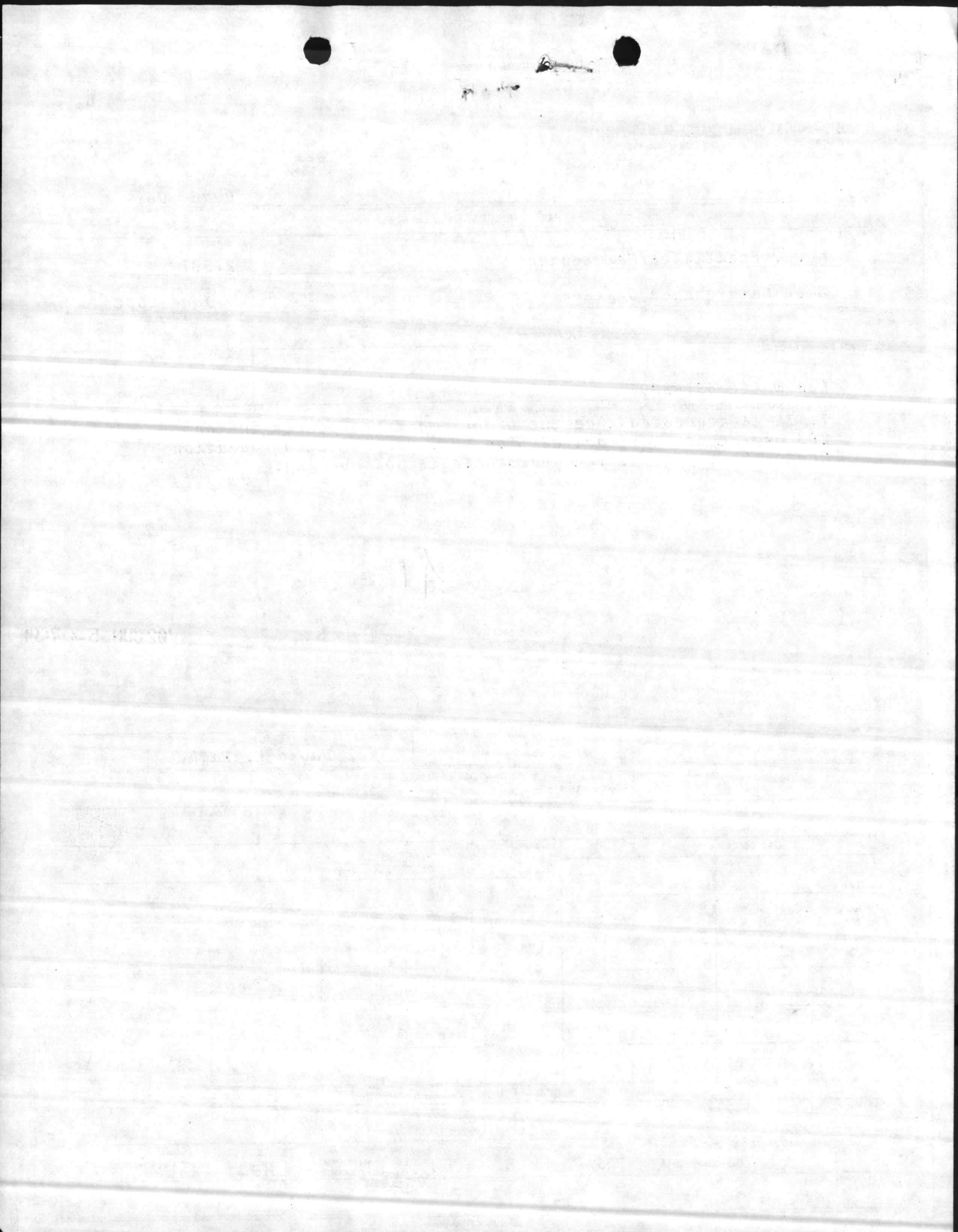
9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>David L. Parker</i>
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PART II—COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		22. DATE	
21. SIGNATURE			



WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
 Supersedes NAVDOCKS 2351

(PW Department see Instructions
 in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance		2. REQUEST NO. 21537
3. TO Base Maintenance Officer		4. DATE OF REQUEST 31 May 2002
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Ron White 451-3091		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

9. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)

1. Request air handler be replaced on the second floor of Bldg 202, Consolidation Education Center next to room 209.

DATE: 3 June 02
 TIME: 08:34

Handwritten: 14 Ole 47-53

9. FUNDS CHARGEABLE

Handwritten: APT

10. SIGNATURE (Requesting Official)

Handwritten Signature: David A. [unclear]

PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____ IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
21. SIGNATURE				22. DATE	

(See Part IV on Reverse Side)



bag

08.31

Low level

79A

TAB PLACEMENT HERE

DESCRIPTION:

CONT. DATA



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TAB PLACEMENT HERE

DESCRIPTION:

J.O. Pending



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BASE MAINTENANCE JOB ORDER

WHITE

FY 99	AG/SAG EBEY	REQ CODE B057	REQUEST # 802G3	DIST. DATE-BY 10-13-98		FACILITY # 202	
AAC M6001	FA 23	WC	FC RL	CC/SOC	CAC EBLO	BRC	JN/LU 1002
WGC 05	TYPE OF WORK RT	PROJECT #	SKETCH Y	PLAN	SPECIAL INSTRUCTIONS		

FOR FURTHER INFORMATION CONTACT: RON WHITE PH: 451-3091

GENERAL JOB DESCRIPTION: INSTALL EMT CONDUIT, WIRING, BOXES AND OUTLETS IN ROOM 101 FOR NEW COMPUTER CLASSROOM. SEE SKETCH FOR DETAILS.

Comps used 13 hrs

9 Nov 98

START DATE:

COMPLETE BY:

COMPLETION DATE:

4-1-99

PHASE SEQUENCE

DBW

SUMMARY OF ESTIMATES

PHASE NO.	WORK CENTER	EST HRS	WORK CENTER	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
1	41	16	41ELT	16	\$422	\$207	\$629
			73V	VEH	CHG	\$9	\$9
TOTALS				S 16	\$422	\$216	\$638

CONTINUED ON SH_0_THRU_0_

PREPARED BY: DAVIS

DATE: 7 OCT 98

REVIEWED BY:

[Signature]

AUTHORIZED BY:

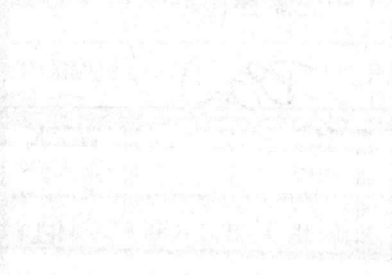
[Signature]

DATE: 10 8 98

SHEET 1 OF 8

1009





BASIC MAINTENANCE JOB ORDER

FY 99	AG/SAG EBEY	REQ. CODE B057	REQUEST # 80203	DIST. DATE-BY 10-13-98		FACILITY # 202		
AAC M6700	FA 23	WC	FC RL	OC/SOC	CAC EBLφ	BRC	JN/LU 1002	RON RBC
WGC 05	TYPE OF WORK R1	PROJECT #		SKETCH Y	PLAN	SPECIAL INSTRUCTIONS		

FOR FURTHER INFORMATION CONTACT: RON WHITE PH: 451-3091

GENERAL JOB DESCRIPTION: INSTALL EMT CONDUIT, WIRING, BOXES AND OUTLETS IN ROOM 101 FOR NEW COMPUTER CLASSROOM. SEE SKETCH FOR DETAILS.

START DATE: 9 NOV 98 COMPLETE BY: DBW COMPLETION DATE: 11/22/99

PHASE SEQUENCE		SUMMARY OF ESTIMATES						
PHASE NO.	WORK CENTER	EST HRS	WORK CENTER	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST	
1	41	16	41ELT	16	\$422	\$207	\$629	
			73V	VEH	CHG	\$9	\$9	
TOTALS				S	16	\$422	\$216	\$638

CONTINUED ON SH_0_ THRU_0_

PREPARED BY: DAVIS

DATE: 7 OCT 98

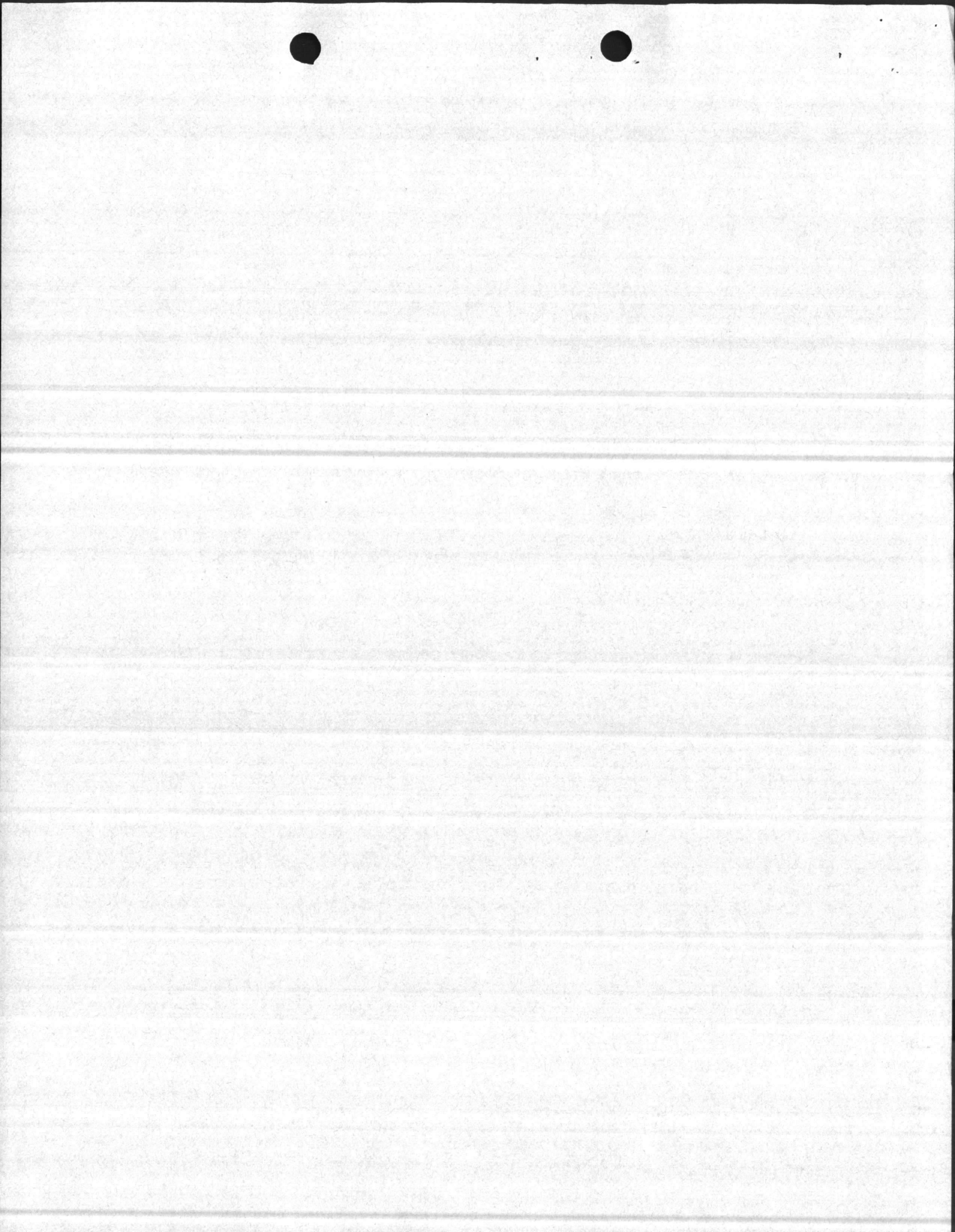
REVIEWED BY: *[Signature]*

AUTHORIZED BY: *[Signature]*

DATE: 10 8 98

SHEET 1 OF 8

1002



*** PHASE DESCRIPTIONS ***

JOB/IFS CRAFT/PHASE	WORK CENTER	CRAFT NAME	BLDG/ FACILITY	EST HOURS
1 1/1	41ELT	COMPANY CONCEPT ELECTRICAL	02	16
INSTALL CONDUIT, WIRING, BOXES AND OUTLETS IN ROOM 101 FOR NEW COMPUTER CLASSROOM.				

*** TOTAL NUMBER OF PHASES ARE *** 1

*** THE LAST PHASE HAS BEEN PRINTED ***

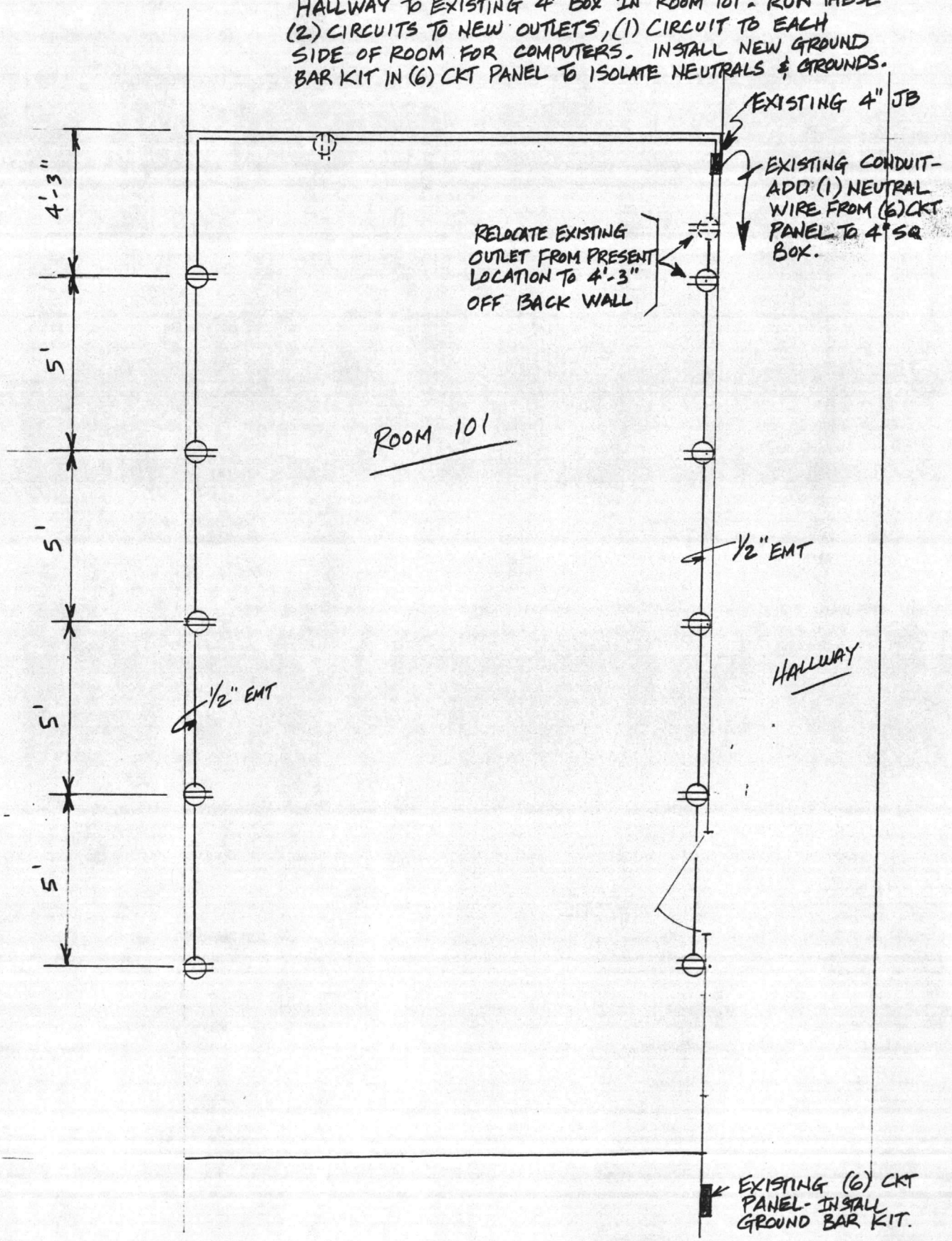
SH# 2
1002

1005

BLDG 202
ROOM 101

ELECTRICAL

NOTE: INSTALL (10) NEW DUPLEX OUTLETS IN 4" SQ BOXES WITH RAISED COVERS, SPACED AS SHOWN. INSTALL ADDITIONAL NEUTRAL CONDUCTOR FROM (6) CKT PANEL IN HALLWAY TO EXISTING 4" BOX IN ROOM 101. RUN THESE (2) CIRCUITS TO NEW OUTLETS, (1) CIRCUIT TO EACH SIDE OF ROOM FOR COMPUTERS. INSTALL NEW GROUND BAR KIT IN (6) CKT PANEL TO ISOLATE NEUTRALS & GROUNDS.



1002
54#3

1005

2/14/00

DATE: 98/10/07

EPS JOB NO: 80203
FEJE PHASE NO: 1 IFS PHASE NO: 1

PAGE: 1

*** BILL OF MATERIALS ***

ACCOUNT CODE NUMBER: 1
PREPARED BY:
JOB ORDER NUMBER:

DATE CREATED: 98/10/07
DELIVERY DATE: 00 00 00
DELIVER MATERIALS TO: WC41ELT

MCN-NSN	NOMENCLATURE	UI	U/COST	QTY	SOS	COST
5306-00-209-37550	TOGGLE BOX 3/16X3"	BX	3.34	1		3.34
5310-00-093-69360	FENDER WASHER 1/4 X 1 1/4	EA	.11	25		2.75
5340-00-598-99800	EMT1 STRAP .50	EA	.08	20		1.60
5925-7G-TAG-RDBR0	GRD BAR KIT # PK7GTA	EA	2.65	1		2.65
5935-01-C00-11410	WIRE NUTS #16-#10 RED LARG	BX	8.80	1		8.80
5935-NE-MA5-20000	REC DUPLEX BROWN NEMA 5-20	EA	2.12	10		21.20
5975-00-081-94010	EMT1 CONNECT .50	EA	.44	25		11.00
5975-00-178-12160	EMT1 .50	LG	1.52	8		12.16
5975-00-284-62840	COVER R 4" SQ 1 DUPLEX R#8	EA	.65	10		6.50
5975-00-LON-GLEY0	EMT1 COUPLING .50 LONGLEY	EA	.19	10		1.90
5975-01-145-67700	BOX 4" SQ 1/2"/3/4"KO 21/8	EA	1.35	10		13.50
6145-00-173-66430	#12 2 WHITE THHN SOLID	SL	21.87	1		21.87
6145-00-239-12450	#12 3 BLACK THHN SOLID	CL	24.53	1		24.53
6145-00-239-13040	#12 1 GREEN THHN SOLID	CL	22.79	1		22.79
6145-00-239-13060	#12 4 RED THHN SOLID	SL	22.65	1		22.65
9999-99-999-99990	MISC MATERIAL	EA	10.00	3		30.00

TOTAL MATERIAL COST: \$207.24

*** END OF BOM SUMMARY ***

7 #4S
1002

21# F
1005

DATE: 98/10/07

EPS JOB: 80203

*** FEJE - DETAILED ESTIMATES ***
*** BILL OF MATERIALS ***

PAGE: 1

WORK REQUEST NUMBER: 80203
ACCOUNT CODE NUMBER: 1
PREPARED BY:
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 98/10/07
DELIVERY DATE: 00 00 00
DELIVER MATERIALS TO: WC41ELT

MCN-NSN: 5306-00-209-37550 UNIT OF ISSUE: BX SOURCE OF SUPPLY:
QUANTITY: 1 UNIT COST: 3.34 TOTAL COST: 3.34
LOCATION:
DESCRIPTION: BOLT, TOGGLE, 10-24 NC THD, 3" LONG, STEEL, RD HD, TWO
PIECE SPRING WING, CAD PLTD, 50 PER BOX, 3/16"X3"LG
S/S-SHOP STORES
-
-
-

MCN-NSN: 5340-00-598-99800 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 20 UNIT COST: .08 TOTAL COST: 1.60
LOCATION:
DESCRIPTION: STRAP, EMT, 1/2"
-
-
-

MCN-NSN: 5925-7G-TAG-RDBR0 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 1 UNIT COST: 2.65 TOTAL COST: 2.65
LOCATION:
DESCRIPTION: GROUND BAR KIT SQ D # PK7GTA FOR (6) CKT PANEL
SS. LONGLEY SUPPLY
-
-
-

MCN-NSN: 5935-01-C00-11410 UNIT OF ISSUE: BX SOURCE OF SUPPLY:
QUANTITY: 1 UNIT COST: 8.80 TOTAL COST: 8.80
LOCATION:
DESCRIPTION: WIRE NUTS, #16-#10 WIRE, COLOR RED, ORDER BY BOX 100 PER BOX
-
-
-

MCN-NSN: 5935-NE-MA5-20000 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 10 UNIT COST: 2.12 TOTAL COST: 21.20
LOCATION:
DESCRIPTION: RECEPTACLE NEMA 5-20 DUPLEX BROWN 120 VOLTS 20 AMPS.
EAGLE P/N CR20B
S/S LONGLEY SUPPLY JAX N.C. 455-3311
.
.
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*** CONTINUED ON PAGE 2 ***

SH# 5
1002

1005

DATE: 98/10/07

EPS JOB: 80203

*** FEJE - DETAILED ESTIMATES ***
*** BILL OF MATERIALS ***

PAGE: 2

WORK REQUEST NUMBER: 80203
ACCOUNT CODE NUMBER: 1
PREPARED BY:
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 98/10/07
DELIVERY DATE: 00 00 00
DELIVER MATERIALS TO: WC41ELT

MCN-NSN: 5975-00-081-94010 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 25 UNIT COST: .44 TOTAL COST: 11.00
LOCATION:
DESCRIPTION: CONNECT CONDUIT EMT 1/2"
SS-SHOP STORE
-
-
-

MCN-NSN: 5975-00-178-12160 UNIT OF ISSUE: LG SOURCE OF SUPPLY:
QUANTITY: 8 UNIT COST: 1.52 TOTAL COST: 12.16
LOCATION:
DESCRIPTION: CONDUIT, EMT 1/2"
-
-
-

MCN-NSN: 5975-00-284-62840 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 10 UNIT COST: .65 TOTAL COST: 6.50
LOCATION:
DESCRIPTION: COVER RAISED 4" SQ. FOR ONE DUPLEX RECP. RACO 802
-
-
-

MCN-NSN: 5975-00-LON-GLEY0 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 10 UNIT COST: .19 TOTAL COST: 1.90
LOCATION:
DESCRIPTION: COUPLING, CONDUITE, EMT, 1/2"
RACO P# 2822
SS-LONGLEY 455-3311
-
-
-

MCN-NSN: 5975-01-145-67700 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 10 UNIT COST: 1.35 TOTAL COST: 13.50
LOCATION:
DESCRIPTION: BOX JUNCTION 4"SQUARE 1/2"& 3/4" K.O. 2 1/8" DEEP.
RACO P/N 232 OR EQUAL.
-
-
-

*** CONTINUED ON PAGE 3 ***

94#6
1002



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1005

DATE: 98/10/07

EPS JOB: 80203

*** FEJE - DETAILED ESTIMATES ***

PAGE: 3

*** BILL OF MATERIALS ***

WORK REQUEST NUMBER: 80203
ACCOUNT CODE NUMBER: 1
PREPARED BY:
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 98/10/07
DELIVERY DATE: 00 00 00
DELIVER MATERIALS TO: WC41ELT

MCN-NSN: 6145-00-173-66430 UNIT OF ISSUE: SL SOURCE OF SUPPLY:
QUANTITY: 1 UNIT COST: 21.87 TOTAL COST: 21.87
LOCATION:
DESCRIPTION: WIRE #12 THHN, SOLID WHITE
-
-
-

MCN-NSN: 6145-00-239-12450 UNIT OF ISSUE: CL SOURCE OF SUPPLY:
QUANTITY: 1 UNIT COST: 24.53 TOTAL COST: 24.53
LOCATION:
DESCRIPTION: WIRE, #12 THHN, SOLID BLACK
-
-
-

MCN-NSN: 6145-00-239-13040 UNIT OF ISSUE: CL SOURCE OF SUPPLY:
QUANTITY: 1 UNIT COST: 22.79 TOTAL COST: 22.79
LOCATION:
DESCRIPTION: WIRE, #12 THHN, GREEN SOLID
-
-
-

MCN-NSN: 6145-00-239-13060 UNIT OF ISSUE: SL SOURCE OF SUPPLY:
QUANTITY: 1 UNIT COST: 22.65 TOTAL COST: 22.65
LOCATION:
DESCRIPTION: WIRE, #12 THHN, RED SOLID
-
-
-

MCN-NSN: 9999-99-999-99990 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 3 UNIT COST: 10.00 TOTAL COST: 30.00
LOCATION:
DESCRIPTION: MISC MATERIAL FOR ITEMS NOT INCLUDED ON JOB
-
-
-

SOS TOTAL COST: \$204.49

*** CONTINUED ON PAGE 4 ***

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SH#7



11
12
13
14
15

DATE: 98/10/07

EPS JOB: 80203

*** FEJE - DETAILED ESTIMATES ***
*** BILL OF MATERIALS ***

PAGE: 4

WORK REQUEST NUMBER: 80203
ACCOUNT CODE NUMBER: 1
PREPARED BY:
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 98/10/07
DELIVERY DATE: 00 00 00
DELIVER MATERIALS TO: WC41ELT

MCN-NSN: 5310-00-093-69360	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: .
QUANTITY: 25	UNIT COST: .11	TOTAL COST: 2.75
LOCATION:		
DESCRIPTION: FENDER WASHER, 1/4" X 1 1/4"		

-
-
-

SOS TOTAL COST: \$2.75

PHASE TOTAL COST: \$207.24

84#8
1002

1005

SEE COST ESTIMATE
RETURN

[Faint handwritten notes and markings, possibly including "2/28" and "1/28"]

Requestor see Instructions on Reverse Side

PART I—REQUEST (Filled out by Requestor)		BO 57
1. FROM Consolidate Education Center	2. REQUEST NO. 80203	
3. TO Base Maintenance ^{MAINTENANCE} Office	4. DATE OF REQUEST 980205 09	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ASAP	
6. FOR FURTHER INFORMATION CALL	7. SKETCH/PLAN ATTACHED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)
 Ron White Ext 3091

1. Bldg 202 room 101 request six (6) electrical outlets , For Computers.

Justification: Safety

UC

RECEIVED
 09 FEB 9 PM 3 34
 BASE MAINTENANCE
 OPERATIONS DIVISION

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) J T WATERS GS -12
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PART II—COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

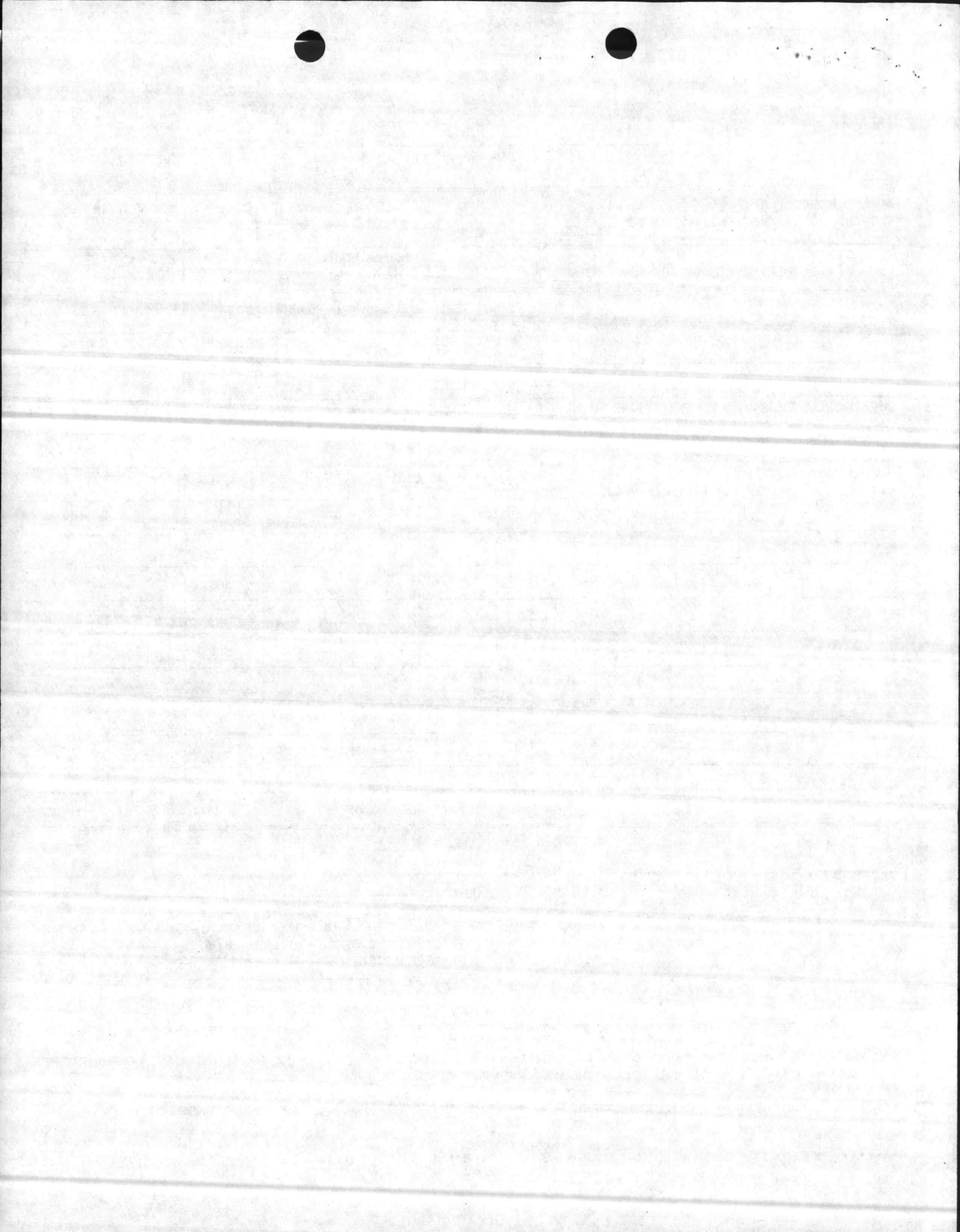
11. TO:	12. ESTIMATE NO.																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">13. COST ESTIMATE</th> </tr> <tr> <td style="width: 70%;">a. Labor</td> <td style="width: 30%;">\$</td> </tr> <tr> <td>b. Material</td> <td>\$</td> </tr> <tr> <td>c. Overhead and/or Surcharge</td> <td>\$</td> </tr> <tr> <td>d. Equipment Rental/Usage</td> <td>\$</td> </tr> <tr> <td>e. Contingency</td> <td>\$</td> </tr> <tr> <td>f. TOTAL</td> <td>\$</td> </tr> </table>	13. COST ESTIMATE		a. Labor	\$	b. Material	\$	c. Overhead and/or Surcharge	\$	d. Equipment Rental/Usage	\$	e. Contingency	\$	f. TOTAL	\$	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td colspan="2">15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> DISAPPROVED. (See Reverse Side)</td> </tr> <tr> <td style="width: 70%;">16. SIGNATURE</td> <td style="width: 30%;">17. DATE</td> </tr> </table>	14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO		15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____		<input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)		16. SIGNATURE	17. DATE
13. COST ESTIMATE																									
a. Labor	\$																								
b. Material	\$																								
c. Overhead and/or Surcharge	\$																								
d. Equipment Rental/Usage	\$																								
e. Contingency	\$																								
f. TOTAL	\$																								
14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO																									
15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____																									
<input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.																									
<input type="checkbox"/> DISAPPROVED. (See Reverse Side)																									
16. SIGNATURE	17. DATE																								

PART III—ACTION (Filled out by Requestor)

18. TO:	19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER
21. SIGNATURE	20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
	22. DATE

(See Part IV on Reverse Side)

1002



WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510
Supersedes NAVDOCKS 2351

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

PART I—REQUEST (Filled out by Requestor)

BO 57

1. FROM Consolidate Education Center		2. REQUEST NO. 80203	
3. TO Base MAINTENANCE Office		4. DATE OF REQUEST 980205 09	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ASAP	
6. FOR FURTHER INFORMATION CALL Ron White Ext 3091		7. SKETCH/PLAN ATTACHED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)			

1. Bldg 202 room 101 request six (6) electrical outlets , For Computers.

Justification: Safety

UC

RECEIVED
 09 FEB 9 PM 3 34
 BASE MAINTENANCE
 OPERATIONS DIVISION

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) J T WATERS GS -12
---------------------	--

PART II—COST ESTIMATE
(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.	
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
b. Material	\$		
c. Overhead and/or Surcharge	\$		
d. Equipment Rental/Usage	\$		
e. Contingency	\$		
f. TOTAL	\$	16. SIGNATURE	17. DATE

PART III—ACTION (Filled out by Requestor)

18. TO:		19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		20. WORK REQUESTED <input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS	
21. SIGNATURE		22. DATE			

(See Part IV on Reverse Side)

Encl(1)

1002

INSTRUCTIONS

IF ESTIMATE IS DESIRED BEFORE WORK IS STARTED

Requestor fills in all items in Part I, checks "Cost Estimate" in item 5, attaches sketch or plan if necessary, and checks proper block in item 7. Requestor retains last copy and forwards balance to Public Works Department.

If the Work Request is approved, the original and first copy will be returned to the requestor with Part II completed. If the requestor desires the work to proceed in accordance with the estimate provided, he should fill in Part III, checking proper block in item 19 and attaching the document citing the funds to be used. If the requestor decides not to authorize the work, the appropriate box in item 20 should be checked. The original form, in either case, is returned to the Public Works Department.

If the Work Request is disapproved, the reasons for disapproval will be stated in Part IV, signed by the Public Works Officer, and the original and one copy returned to the requestor.

IF ESTIMATE IS NOT DESIRED BEFORE WORK IS STARTED AND FUNDS ARE NOT UNDER COGNIZANCE OF PWO

Requestor fills in all items in Parts I and III except item 20, checks "Performance of Work" in item 5, attaches sketch or plan if necessary, checks proper block in item 7, checks proper block in item 19, and attaches document citing the funds to be used. Requestor retains last copy and forwards balance to Public Works Department.

If the Work Request is approved, the first copy will be returned to the requestor with items 11, 12, 15, 16, and 17 of Part II completed.

If the Work Request is disapproved, the reasons for disapproval will be stated in Part IV, signed by the Public Works Officer, and the original and one copy returned to requestor.

IF ESTIMATE IS NOT DESIRED BEFORE WORK IS STARTED AND FUNDS ARE UNDER COGNIZANCE OF PWO

Requestor fills in all items in Part I, checks "Performance of Work" in item 5, attaches sketch or plan if necessary, and checks proper block in item 7. Requestor retains last copy and forwards balance to the Public Works Department.

If the Work Request is approved, the first copy will be returned to the requestor with items 11, 12, 15 as applicable, 16 and 17 of Part II completed.

If the Work Request is disapproved, the reasons for disapproval will be stated in Part IV, signed by the Public Works Officer, and the original and one copy returned to requestor.

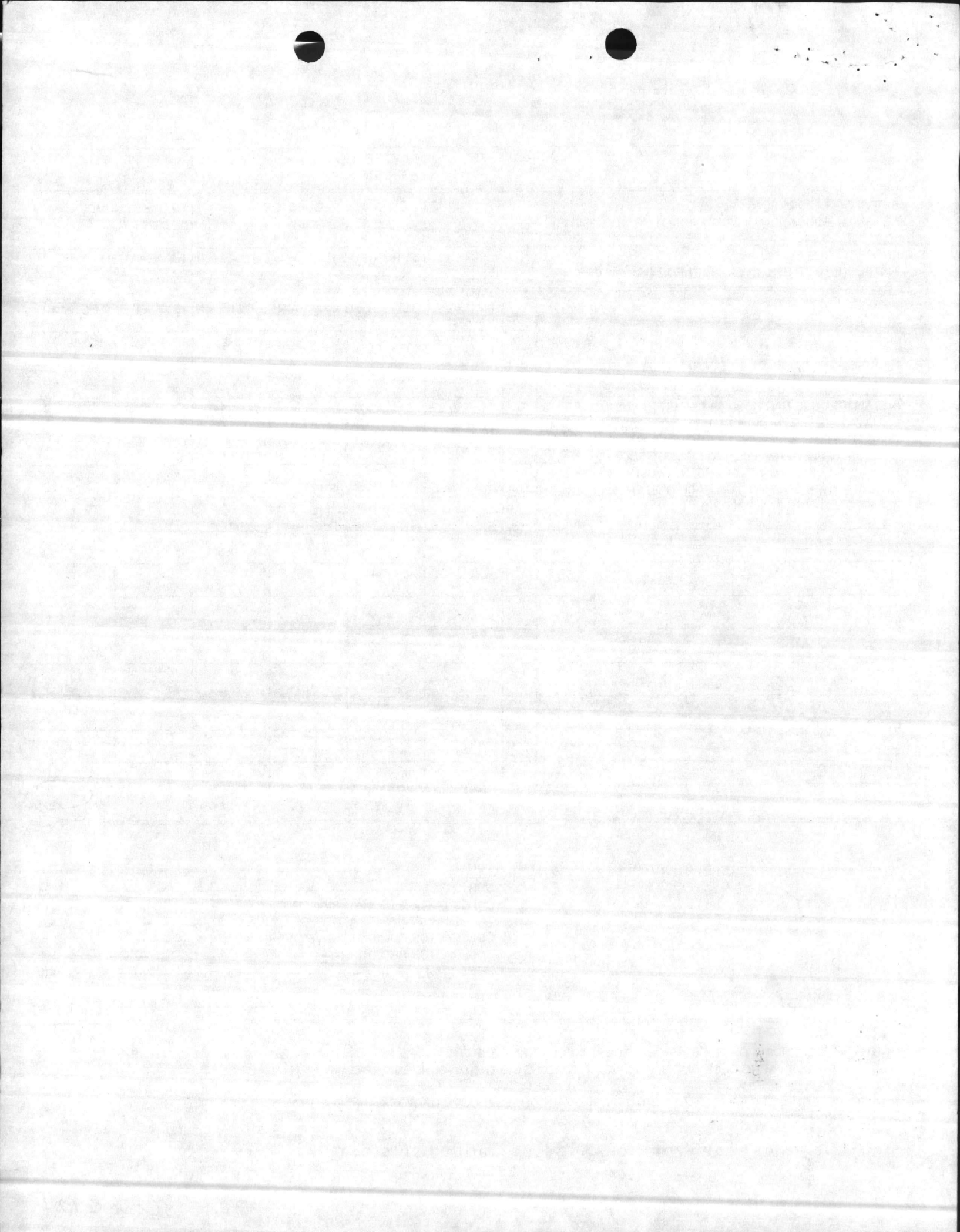
PART IV—REMARKS

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[Handwritten notes: 80103, PO...]



1008





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100
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DATE: 10/ 7/98

EPS JOB: 80203

*** FEJE - DETAILED ESTIMATES ***
*** JOB PLANNING WORKSHEET DA FORM 2764-E ***

PAGE: 4

*** JOB PHASE SUMMARY ***

CRAFT TIME 8.4
TOTAL EPS TIME 14.0
TOTAL NON-EPS TIME 2.0

TOTAL PHASE TIME 16.0

*** THE LAST PHASE HAS BEEN PRINTED - END OF PHASE PRINTOUT ***

EPS
1002



1005