

FILE FOLDER

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HP 301

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HP 301

Misc

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DESCRIPTION:

J.O. CARD

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BLDG NO 301	INT. PAINT SQ FT 49,538 sf	EXT. PAINT SQ FT 1500 sf 214 wind.	ROOF SQ FT	CONDEN. LINES LIN FT	FACILITY HISTORY RECORD MCBCL 11011/3
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JOB ORDER NO	DATE COMPLETED signed	COST	DESCRIPTION
022-06741-620	2/28/62		Rehabilitate steam pit
022-06741-620	4/3/62		Renovate (C-5/4/62*)
022-06741-620	437 4/3/62		Paint interior (C6/1/62)
022-06741-620	437 4/3/62		Paint exterior (C 6/15/62)
CONTRACT	C 3/29/65		Repaired Head and shower facilities
Contract	3/31/70		Renovate mechanical system
Contract	12/10/69		Exterior repairs & paint
4674	2-10-72	3179	Paint int 1 coat complete
2456	10-12-73	172	Inst 9 A/C
1094	10-15-73	1514	Construct of Company Admin Spaces
4379	3-20-70	133	Rpr Hot water Ctl
3081	12-27-68	3158	Rpr interior of bldg
HQ8CM-ORA-10V	11-11-67	191	Repair broken water main
5209	5-30-75	328	Pull & Repair steam coil
41715	2-14-75	185	Replace steam coil
4687	1-31-75	806	Replace Condensate pump & tank assembly
9152	4-26-78	1310	Install key telephone system in career planner office
3233	11-3-78	171	Install sliding bolts on 18 doors 3 rd deck.
3182	1980	2324	Repl. damaged or missing exits sign
5022	3-13-81	3507	Rpr balcony handrails
4081	9-26-80	959	" " "
5011	12-14-80	319	Rpl (10) venetian blinds
5030	4-10-81	1657	Rpl screws in shower drains
4802	10-31-80	108	Rpl catch basin catches on hand wardrobes
3431	5-2-80	2163	Remove damaged block & brick in wall
0050	8-21-81	1925	Rpl cylinders on door locks

JOB ORDER NO	DATE COMPLETED	COST	DESCRIPTION
5168	3-26-82	2694	Spot weld seams & repair doors
4823	3-25-83	1330	Repl. missing & damaged screens
5083	9/7/83	4054	Rpl/Rpl 900, Plumbing
1395	8/31/83	233	Install lighting controls
5229	12/30/83	2627	Rmv/Rpl Damaged fire hydrant
3600	1/19/83	1146	Rpl Blinds
✓ 3060	12-21-84	3943	Repair ROOF LEAK
3441	5-26-86	3430	Rpl V-Blinds Through-out Rms TOTAL (88)
3582	Compl	2867	Dewinterize central A/C system
3591	Compl	180	PAINT EXT. COMPLETE
3623	7-13-84	738	Rpl VC. CABLE
3693	6-7-85	155	Rpl (1) Bathroom door
3760	7-11-86	606	INSTALL INSULATION IN WALL AROUND AHU
✓ 4024	9-28-84	300	Rpl V-BLINDS & BRACKETS
4196	Compl	261	Repair hand rails on 2nd & 3rd Deck
✓ 4223	10-26-84	2759	Rpl Compressor in A/C
4465	9-30-85	325	Rpl missing & damaged window screen
4968	9-6-85	6,945	PERFORM CYCLIC MAINT REPAIRS
4348	10-27-86	2195	Replace compressor for A/C system
3790	10-4-91	2784	Rpl Comp for A/C system
3994	7-7-92	1302	MAKE CYCLIC MAINT RPRS
3129	8-26-94	6231	Cyclic MAINT
3129	8-26-94	6693	1st Amend MAINT
3847	8-23-96	8161	Cyclic MAINT purged PURGED 99
4495	9-9-02	10088	Cyclic MAINT 9-9-02 purged R
4608	1-10-98	1077	Cyclic MAINT 9-9-02 purged R
#0088	9-21-98	3156	Shop Procure - Key H301 2 funds 9-9-02 purged R

BLDG CLASS 2 PROPERTY RECORD
 (004) UIC..M67001 (001) PR NO.....2-07597
 MCB CAMP LEJEUNE NC (005) FACILITY NO..HP-301
 (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..10M

GENERAL INFORMATION
 (007) ACTION.....CAP-IMPROV
 (008) FAM HOUSING....NO
 (009) EE DATE.....13 OCT 81
 (011) PR REVIEW DATE..13 OCT 81
 (010) FACILITY NAME..
 BEQ E1-E4

ACQUISITION
 (201) ESTATE.....11 MCON
 (202) ACQ CONTRACT...N74-C-1587
 (203) ACQ DATE.....01 DEC 77
 (204) GOVT COST..... \$1,339,496
 (207) LAND CCN.....91140

MEASUREMENTS
 (301) LENGTH.... 299 FT
 (302) WIDTH..... 49 FT
 (303) HEIGHT.... 30 FT
 (304)/AREA..... 47,590 SF
 (308) AREA UM...
 (305) STORIES... 03
 (307) IRREGULAR. YES

CONSTRUCTION
 (401) YEAR BUILT.....1977
 (402) CONSTRUCTION TYPE..PERMANENT
 (403) YEAR IMPROVED.....

(404) ABMP CODE.....
 (409) PROJECT NO.....P221
 (410) HISTORIC IND...

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

STATUS / MAX OCCUPANCY
 (502) CATEGORY CODE...61010 (501) USE..ADMINISTRATIVE OFFICE
 (510) USER UIC.....M67001.....MCB CAMP LEJEUNE NC

AREA/SF*	OTHER/	ALT/	DEF CODES
ADEQ(515).....6,799.00	(516)	(517)	(524)
SBST(518)	(519)	(520)	(525)
INAD(521)	(522)	(523)	(526)
TOTAL	6,799.00		

AREA#*	OTHER*	ALTA	DEF CODES
ADQC(515).....6,799.00 (516)	(517)	(524)	
28ST(518)	(519)	(525)	
INAD(521)	(523)	(528)	
TOTAL	6,799.00		

(510) USER UIC.....M67001.....MCR CAMP LEJUNE NC
 (505) CATEGORY CODE...61010
 (504) STA T U S V M A X OCCUPANCY
 (503) MAINT UIC..M7001
 (502) PRIME USE...72111
 (501) MEC...4 USMC
 (403) YEAR IMPROVED.....
 (402) CONSTRUCTION TYPE..PERMANENT
 (401) YEAR BUILT.....1977

(307) HISTORIC IND...
 (306) PROJECT NO.....P251
 (305) ABMP CODE.....
 (304) C O N S T R U C T I O N

(307) IRREGULAR... YES
 (305) STORIES... 03
 (308) AREA UM...
 (304) AREA... 47,290 SF
 (303) HEIGHT... 30 FT
 (302) WIDTH... 49 FT
 (301) LENGTH... 299 FT
 (207) LAND CON.....91140
 (204) GOVT COST.....\$1,339,496
 (203) ACC DATE...01 DEC 77
 (202) ACC CONTRACT...W4-C-1287
 (201) ESTATE.....11 MCON

(105) MAP GRID.10M
 (102) AC.....05
 (104) CITY.....0735 CAMP LEJUNE
 (103) COUNTY...133 ONSLOW
 (102) STATE...37 NORTH CAROLINA
 (101) COUNTRY..US UNITED STATES
 (105) MAP GRID.10M
 (102) AC.....05
 (104) CITY.....0735 CAMP LEJUNE
 (103) COUNTY...133 ONSLOW
 (102) STATE...37 NORTH CAROLINA
 (101) COUNTRY..US UNITED STATES

(105) MAP GRID.10M
 (102) AC.....05
 (104) CITY.....0735 CAMP LEJUNE
 (103) COUNTY...133 ONSLOW
 (102) STATE...37 NORTH CAROLINA
 (101) COUNTRY..US UNITED STATES
 (104) UIC..M7001
 (1004) MCR CAMP LEJUNE NC
 (1001) PR NB.....2-07297
 (1002) FACILITY NO..HP-301
 (1003) SPEC AREA...DA
 (1004) HADNOT POINT
 (1005) R E O P E R T Y
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BLDG

CLASS 2 PROPERTY RECORD
(C-O-N-T-I-N-U-A-T-I-O-N)

(004) UIC..M67001
MCB CAMP LEJEUNE NC

(001) PR NO.....2-07597
(005) FACILITY NO..HP-301
(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).....	40,791.00	(516).....264.00	(517)	(524)
SBST(518)		(519)	(520)	(525)
INAD(521)		(522)	(523)	(526)
TOTAL	40,791.00	264.00		

DEF CODES

DEF CODES	AREA	OTHERS	ALT	DEF CODES
(524)	ADCP(515)...	40,791.00 (516)	...5264.00 (517)	(524)
(525)	2B5T(518)	(519)	(520)	(525)
(526)	INAC(521)	(522)	(523)	(526)
	TOTAL	40,791.00	504.00	

(510) USER UIC.....M87001.....MCR CAMP LEJEUNE NC
(505) CATEGORY CODE...75111 (501) USE...JERPH BIVER

HANDOT POINT
(106) SPEC AREA...DA
(005) FACILITY NO..HP-301
(001) PR NO.....S-07597
MCR CAMP LEJEUNE NC
(004) UIC...M87001
BLDG CLASS 5 PROPERTY RECORDED
(C-O-N-T-I-N-U-A-T-I-O-N)

TAB PLACEMENT HERE

DESCRIPTION:

Work Requests

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WORK REQUEST (MAINTENANCE MANAGEMENT)

030515
0830

PART I -- REQUEST (Filled out by Requester)

1. FROM: CG, 2D FORCE SERVICE SUPPORT GROUP, G-4 Facilities	REQUEST NO: F001 029-03
3. TO: Commanding General, MCB, CamLej Attn: Maintenance Operations	2. DATE OF REQUEST: 030515
5. REQUEST FOR: <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START: Routine
FOR FURTHER INFORMATION CALL: SSgt Hill J.C. Rm 122, Phone: 451-3315	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.)

Location: HP 301 Room 102 (1E298), 321 (1E362)

Description: Key duplication ^{2 sets} (1) key per room.

Justification: Keys lost by MP Bn personnel.

Date: 030515
1ST Endorsement
From: CG, 2d FSSG, FMFLant
To: Base Maint Officer
Via: (1)
1. Forwarded i
By direction

45
03-85283

AUTHORIZED SIGNATURE/STAMP: Hill J.C. SSgt, USMC

PART III -- ACTION (Filled out by Requester)

TO:

AUTHORIZATION TO PROCEED:

REQUEST BASE FUNDING

FUNDS WILL BE FORWARDED

WORK REQUESTED

HAS BEEN CANCELED

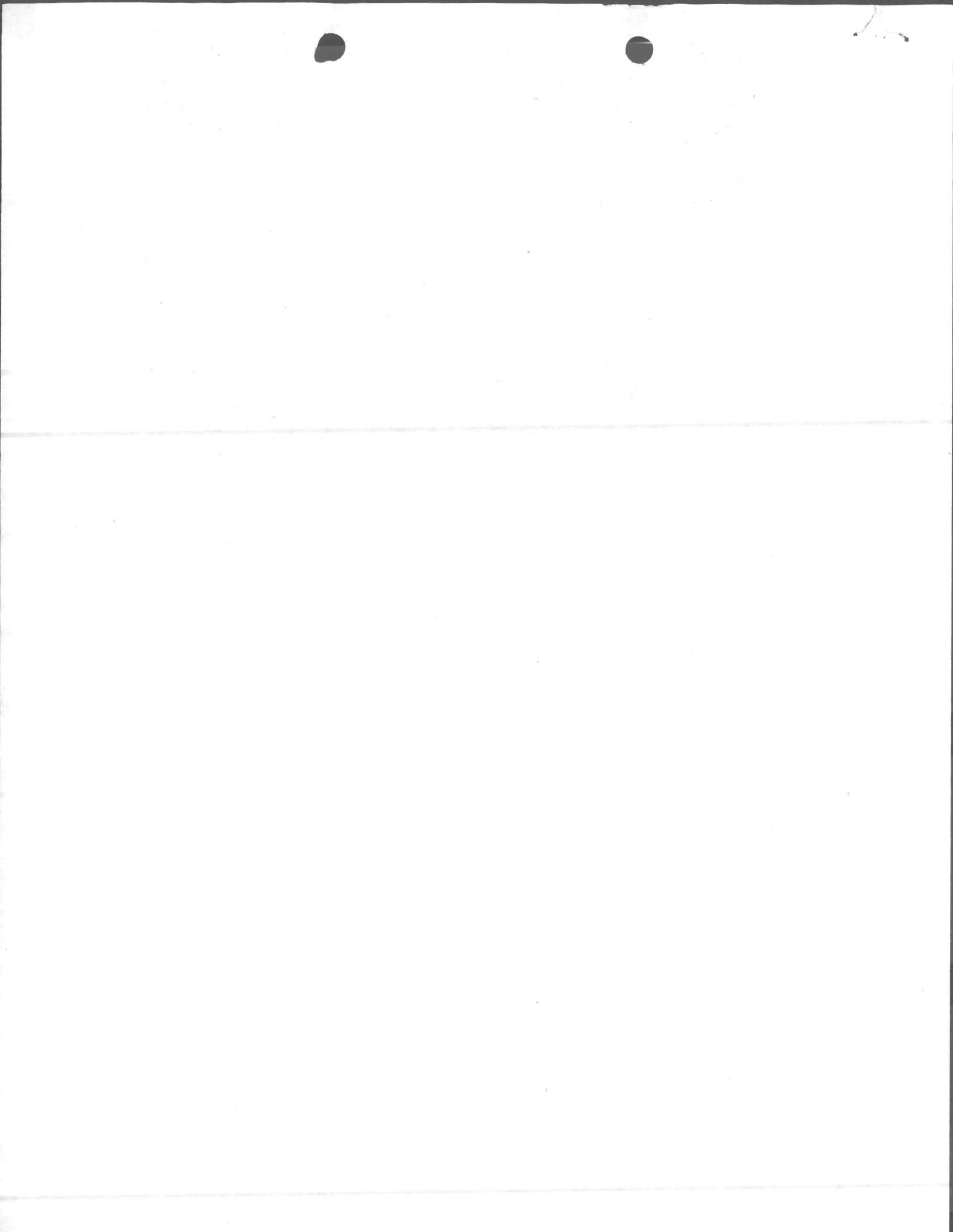
HAS BEEN DEFERRED

WILL BE PERFORMED BY SELF HELP

SIGNATURE

DATE

REMARKS



WORK REQUEST (MAINTENANCE MANAGEMENT)

030516
0830

PART I -- REQUEST (Filled out by Requester)

1. FROM: CG, 2D FORCE SERVICE SUPPORT GROUP, G-4 Facilities	REQUEST NO: F001 030-03
3. TO: Commanding General, MCB, CamLej Attn: Maintenance Operations	2. DATE OF REQUEST: 030516
5. REQUEST FOR: <input type="checkbox"/> COST ESTIMATE <input type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START: Routine
FOR FURTHER INFORMATION CALL: SSgt Hill J.C. Rm 122, Phone: 451-3315	7. SKETCH /PLAN ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO

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

Location: HP 301 Room 309

Description: Tumbler just spins when trying to lock door.

Justification: Marine can't lock the door.

45

03-85285

030516
IS7 Endorsement
From: CG, 2d FSSG, FMFLant
To: Base Maint Officer
Via: (1)
I: Forwarded
By direction

AUTHORIZED SIGNATURE/STAMP: Hill J.C. SSgt, USMC

PART III -- ACTION (Filled out by Requester)

TO:

AUTHORIZATION TO PROCEED:

REQUEST BASE FUNDING

FUNDS WILL BE FORWARDED

WORK REQUESTED

HAS BEEN CANCELED

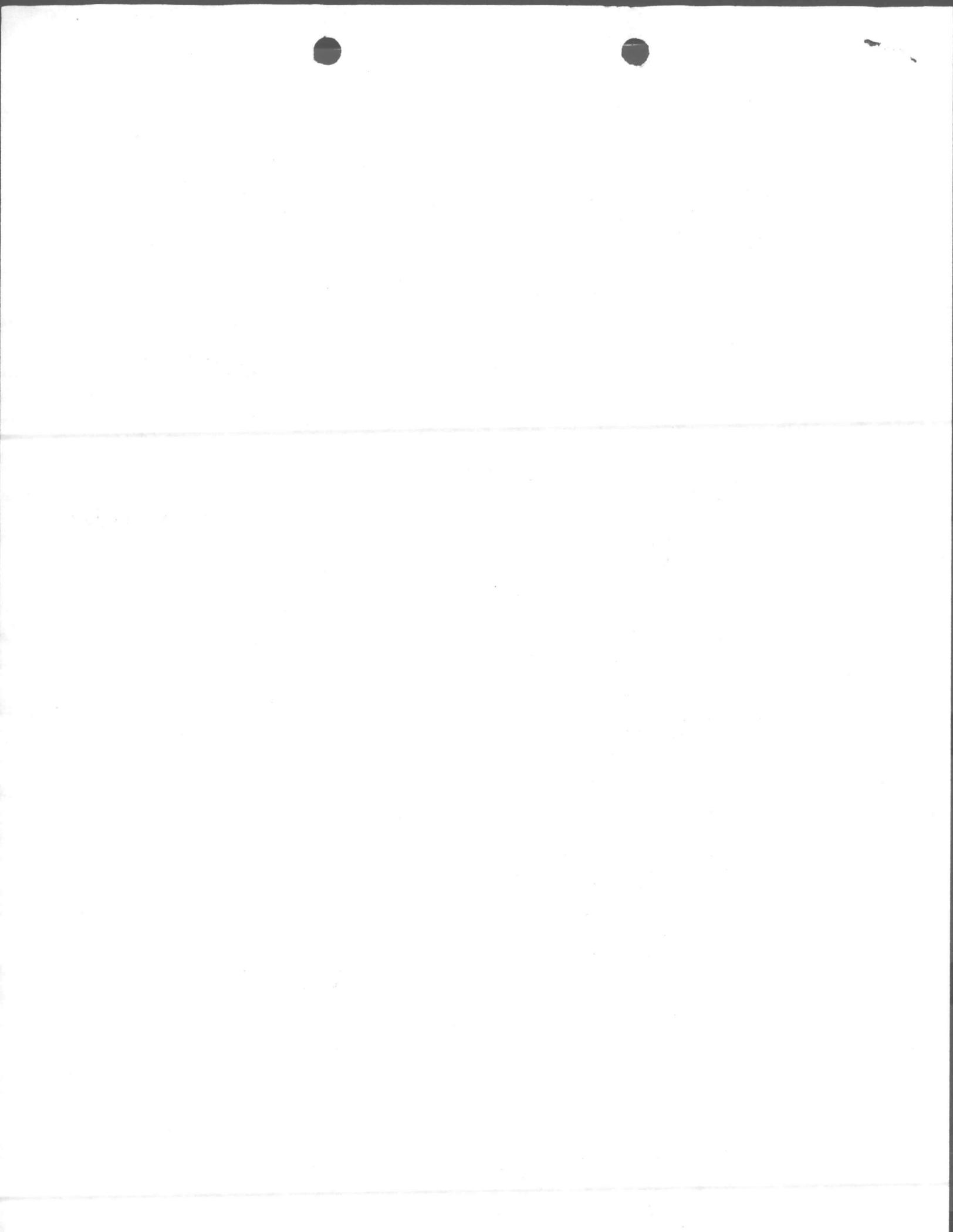
HAS BEEN DEFERRED

WILL BE PERFORMED BY SELF HELP

SIGNATURE

DATE

REMARKS



WORK REQUEST (MAINTENANCE MANAGEMENT)

030325
1525

PART I -- REQUEST (Filled out by Requester)

1. FROM: CG, 2D FORCE SERVICE SUPPORT GROUP, G-4 Facilities	REQUEST NO: F001 020-03
3. TO: Commanding General, MCB, CamLej Attn: Maintenance Operations	2. DATE OF REQUEST: 030325
5. REQUEST FOR: <input type="checkbox"/> COST ESTIMATE <input type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START: Emergency
FOR FURTHER INFORMATION CALL: SSgt Hill 451-3390/526-7864	7. SKETCH /PLAN ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO

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

Location: HP 301 Rm 314,316

Description: Doorknob is broken; door will not stay closed when the wind blows;

Justification: Security of personal gear is compromised.

45

03-66928

030325
1525
Endorsement
From: CG, 2d FSSG, FMFLant
To: Base Maint Officer
(1)
Forwarded
By: [Signature]

AUTHORIZED SIGNATURE/STAMP: Hill J.C., SSgt, USMC

PART III -- ACTION (Filled out by Requester)

TO:

AUTHORIZATION TO PROCEED:

REQUEST BASE FUNDING

FUNDS WILL BE FORWARDED

WORK REQUESTED

HAS BEEN CANCELED

HAS BEEN DEFERRED

WILL BE PERFORMED BY SELF HELP

SIGNATURE

DATE

REMARKS

1900

1901

1902

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WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 (REV. 2/94 (EF)) (New S/N number pending)

28 FEB 03
 Endorsement
 From: CG, 2d FSSG, FMFLant
 To: Base Maint Officer PW Department see instructions in NAVFAC MO-321
 Via: (1)
 Forwarded:

Requestor see instructions on Reverse Side

74 Fisher Rv directive

PART I--REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER HEADQUARTERS AND SERVICE BATTALION		2. REQUEST NO. F014 / C074-03
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2D FSSG (AC/S G-4 FACILITIES OFFICER)		4. DATE OF REQUEST 20030227
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE	<input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL LCPL MUELLER 451-6664		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.) LOCATION: HP 301 RM 3111 DESCRIPTION: REPLACE LOCK IN CEILING THAT HOLDS HEATER ACCESS PANEL UP JUSTIFICATION: SAFETY HAZARD DOES NOT LEAVE SPACE TO WALK UNDER IT TO GET TO SINK 28 FEB 03 1405		

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) B. MUELLER <i>B. Mueller</i>
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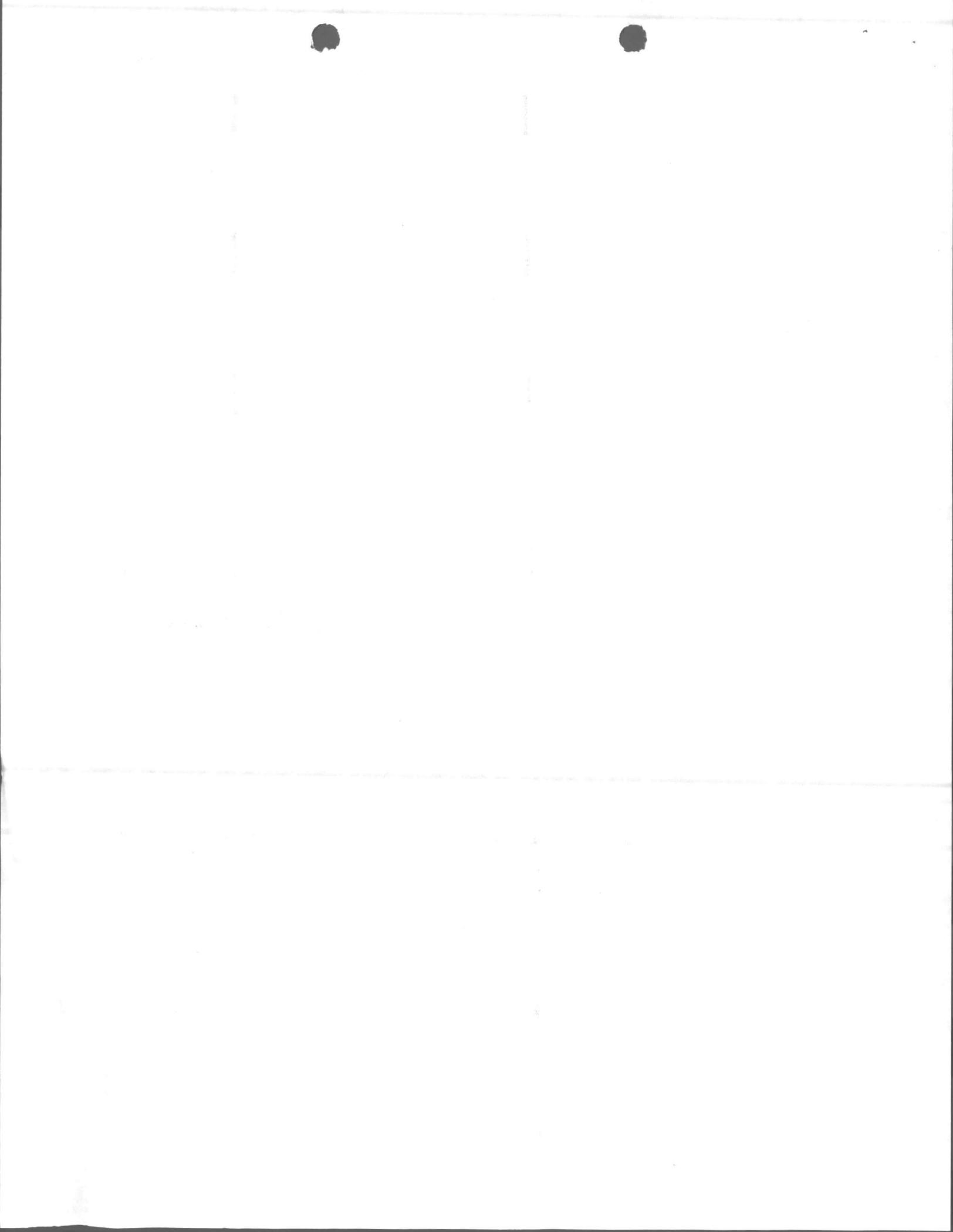
PART II--COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____ PROGRAMMING 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)



WORK REQUEST (MAINTENANCE MANAGEMENT)

PART I -- REQUEST (Filled out by Requester)

1. FROM: Commanding Officer 8 th Communication Bn II MEF <i>030024</i>	2. REQUEST NO: M006/148-03
3. TO: Public Works Officer (attn) <i>A J P</i>	4. DATE OF REQUEST: <input type="checkbox"/> 030224 <i>1625</i>
5. REQUEST FOR: <input type="checkbox"/> <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START: <input type="checkbox"/> 030226
6. FOR FURTHER INFORMATION CALL: SGT. HENRY/SGT. MUHAMMAD/SGT. BROOKS	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.)

Location: HP-301 ROOMS 303, 211, 301, 203

Description: NEEDS KEY REPLACEMENT FOR THESE ROOMS *45*

03-53250

Justification: SO THE MARINES CAN GET IN AND OUT OF THERE ROOMS.

+ AUTHORIZED SIGNATURE/STAMP: *Anthony Casarez*

PART III -- ACTION (Filled out by Requester)

TO:

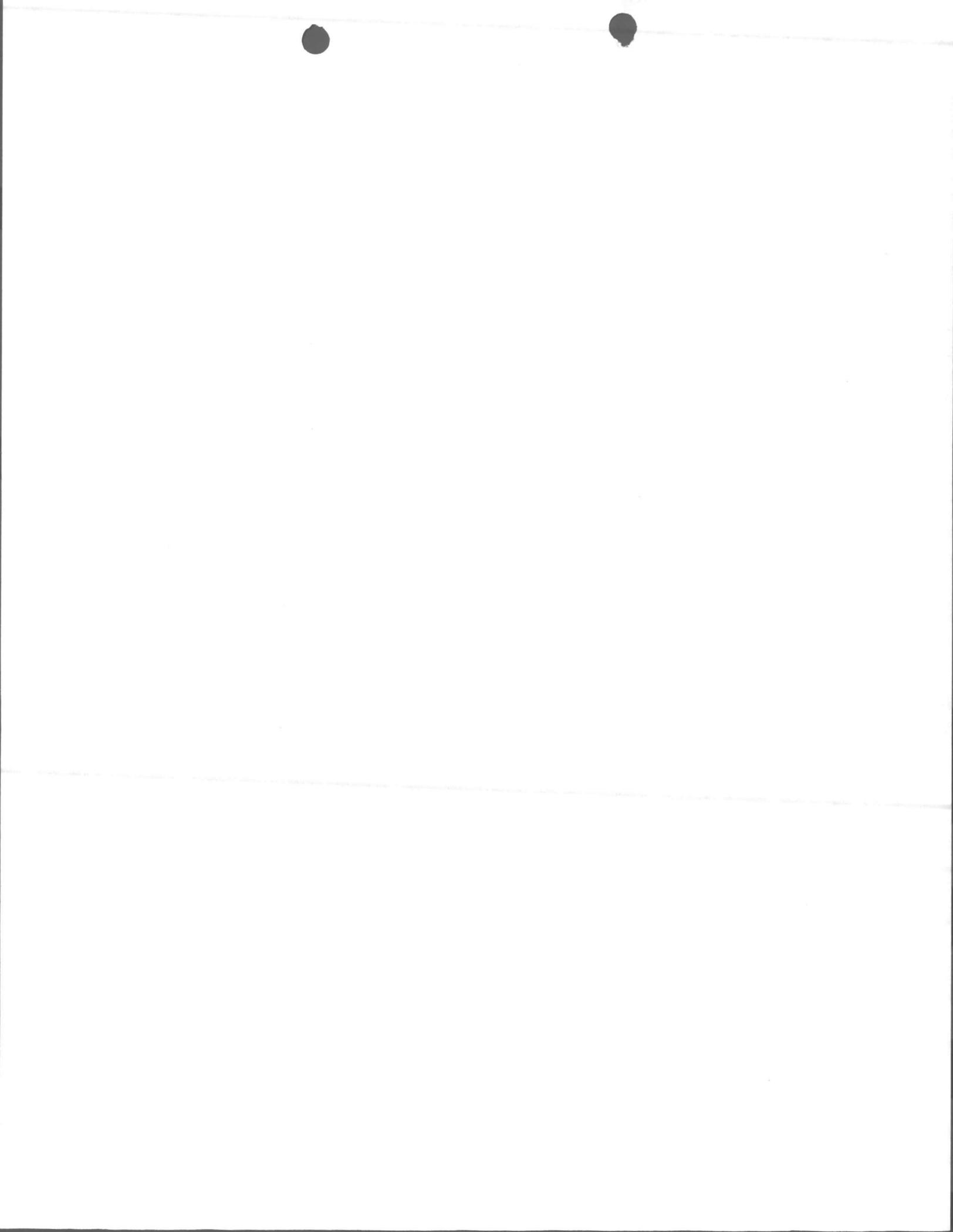
AUTHORIZATION TO PROCEED:

- REQUEST BASE FUNDING
- FUNDS WILL BE FORWARDED WORK REQUESTED
- HAS BEEN CANCELED
- HAS BEEN DEFERRED
- WILL BE PERFORMED BY SELF HELP

SIGNATURE

DATE

REMARKS



WORK REQUEST (MAINTENANCE MANAGEMENT)

PART I – REQUEST (Filled out by Requester)

0855/3 Feb 03

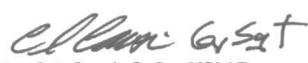
1. FROM: CG, 2D FORCE SERVICE SUPPORT GROUP, G-4 Facilities	REQUEST NO: F001 011-03
3. TO: Commanding General, MCB, CamLej Attn: Maintenance Operations	2. DATE OF REQUEST: 030203
5. REQUEST FOR: <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START: Emergency
FOR FURTHER INFORMATION CALL: Capt Frye Rm 122, Phone: 451-7515 GySgt Caasi Rm 122, Phone: 451-3315	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.)

Location: HP 301 Room 333 Exterior door. 45

Description: Deadbolt falling off/won't lock. lock

Justification: Security of gov't and personnel gear is compromised.


 AUTHORIZED SIGNATURE/STAMP: C.I. Caasi, GySgt USMC

03-46103

PART III – ACTION (Filled out by Requester)

TO:

AUTHORIZATION TO PROCEED:

REQUEST BASE FUNDING

FUNDS WILL BE FORWARDED

WORK REQUESTED

HAS BEEN CANCELED

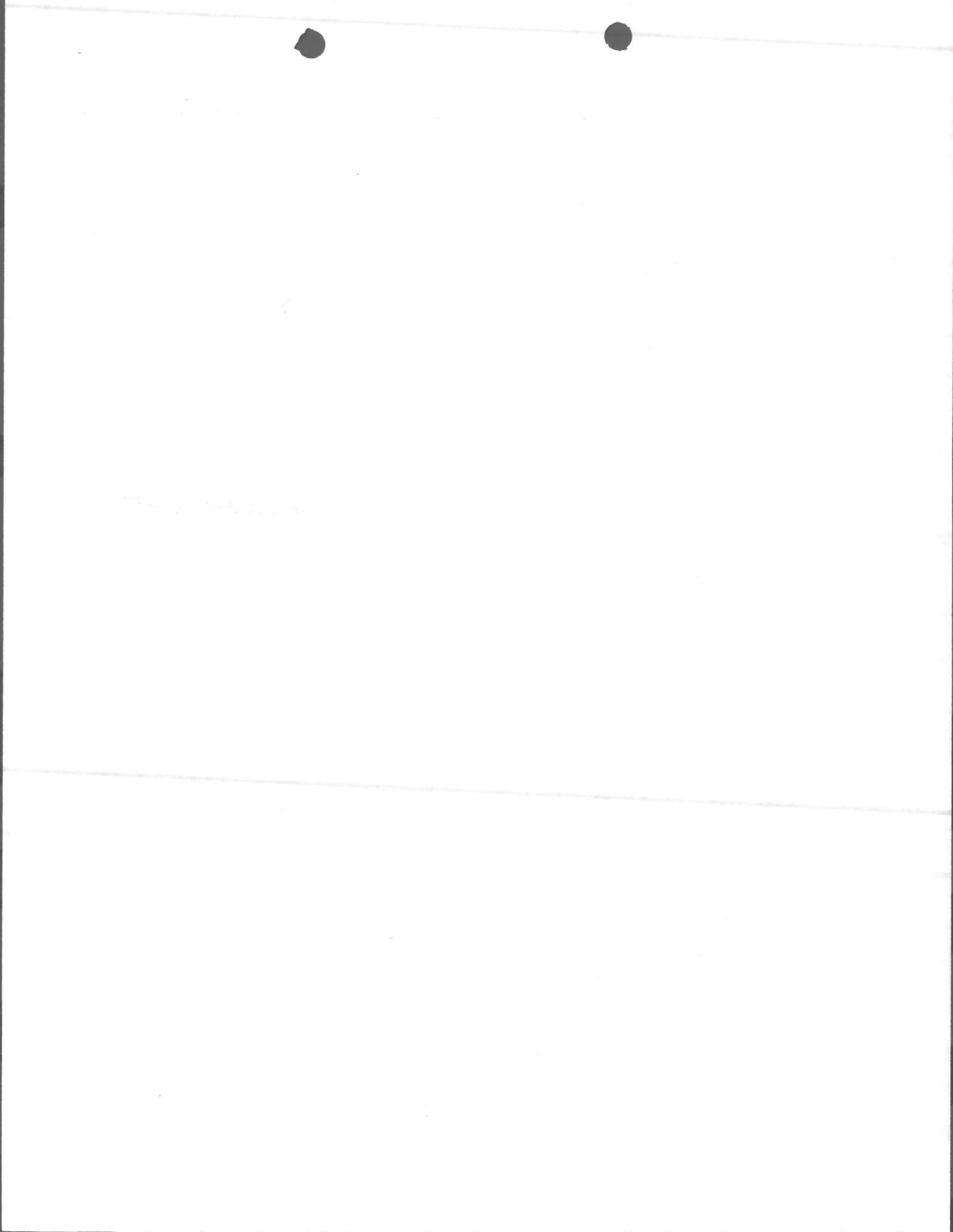
HAS BEEN DEFERRED

WILL BE PERFORMED BY SELF HELP

SIGNATURE

DATE

REMARKS



02126
 1517

Requestor see instructions on Reverse Side

PART 1---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 03-0074	
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG (AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021125	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START EMERGENCY	
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)
 LOCATION: HP 301 DUTY HUT
 DESCRIPTION: DOOR DOES NOT SECURE, APPEARS TO HAVE BEEN PRIED OPEN
 JUSTIFICATION: DUTY HUT DOOR CANT SECURE

021125
 1st Endorsement:
 From: CG, 2d FSSG, FMFLan
 To: Base Maint Officer
 Via: (1)
 Forwarded: *Alan Crist*
 By director

03-22799

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Gilbert Leo Santacruz</i>
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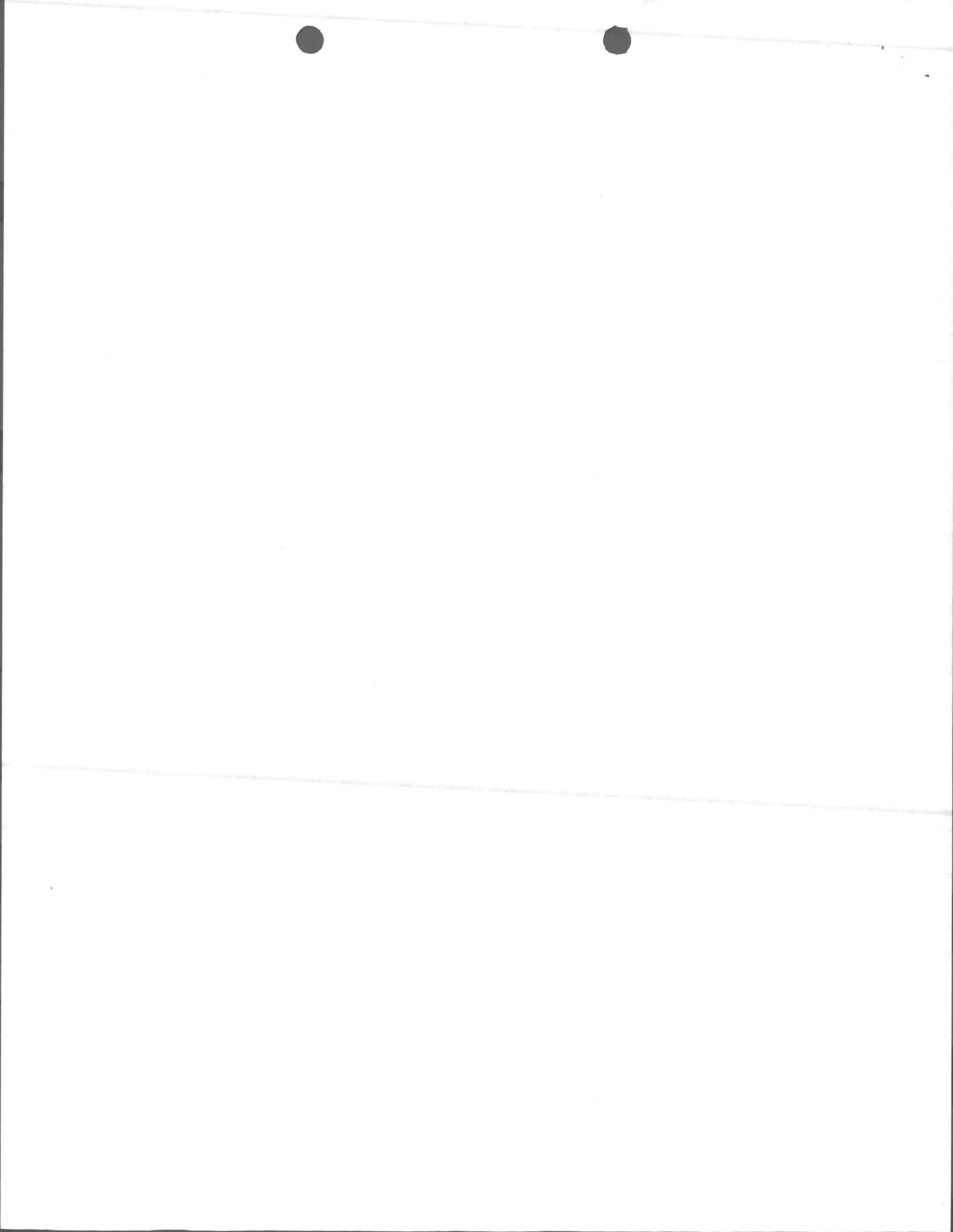
PART II---COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____ PROGRAMMING TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
b. Material		16. SIGNATURE	
c. Overhead and/or Surcharge		17. DATE	
d. Equipment Rental/Usage			
e. Contingency			
f. Total			

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. 2/94 (EF)) (New S/N number pending)

PW Department see instructions in NAVFAC MO-321

021126
1515

Requestor see instructions on Reverse Side

PART 1---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 03-0073	
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG (AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021125	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START EMERGENCY	
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)
 LOCATION: HP 301 ROOM 103
 DESCRIPTION: DOOR JAM ON BOTTOM OF DOOR BEND DOOR IS ALSO BROKEN
 JUSTIFICATION: MARINE CANT CLOSE DOOR

REPAIR AND

Date 021125
 1st Endorsement
 From: CG, 2d FSSG, FMFLA
 To: Base Maint Officer
 Via: (1)
 1: Forwarded:

Review
6301

03-22977

Alfred G. Set
By direction

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Robert Lee Santacruz</i>
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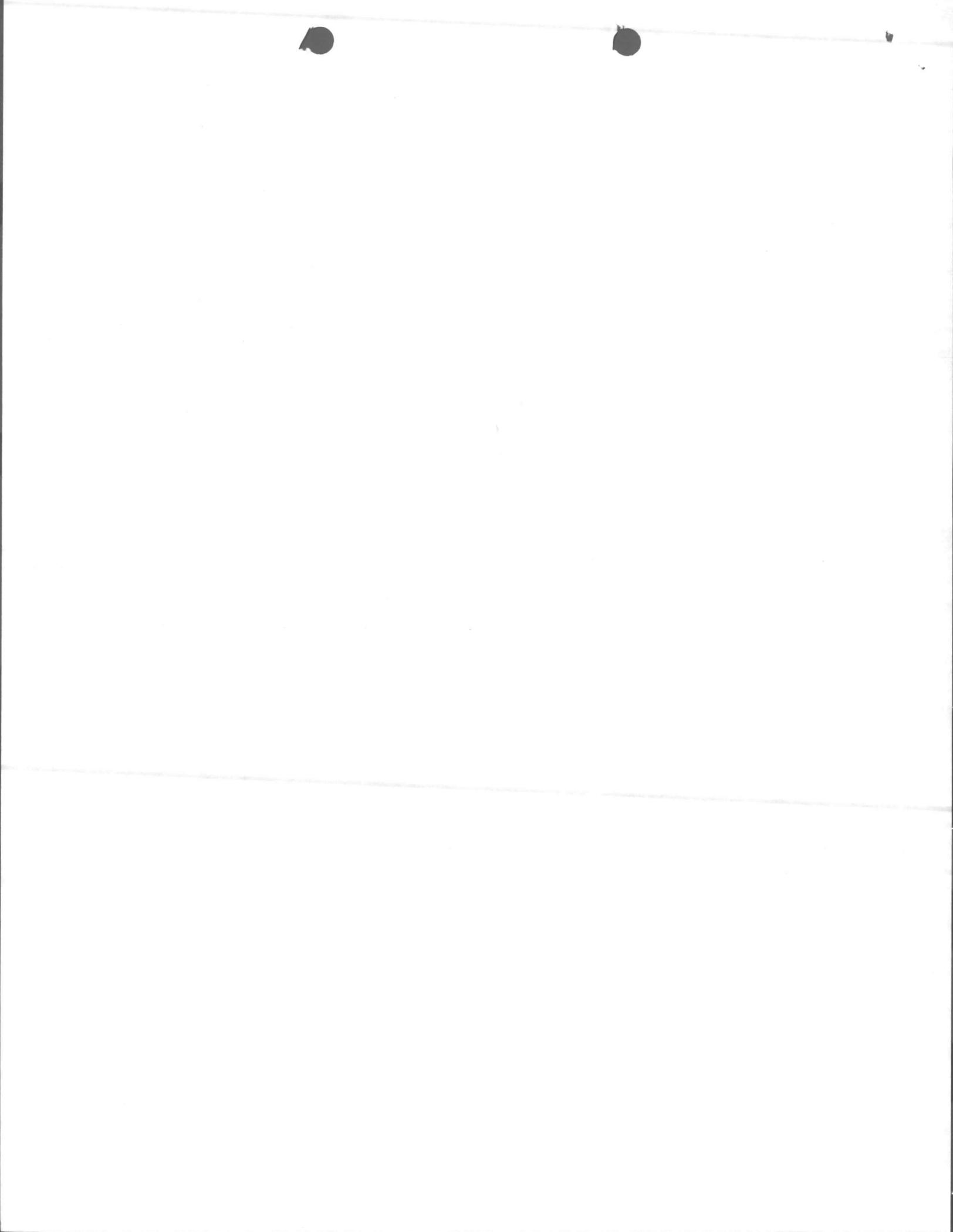
PART II---COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

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 _____	
b. Material		<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____	
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF	
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.	
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
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)



02126
 1515

Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 03-0072
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG (AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021125
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE	<input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START EMERGENCY
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)

LOCATION: HP 301 ROOM 236

DESCRIPTION: DOOR KNOB DOESN'T LATCH OR OPEN FROM INSIDE

JUSTIFICATION: MARINE CANT CLOSE DOOR

021125
 1515 Endorsement

From: CG, 2d FSSG, FMFLan
 To: Base Maint Officer
 Via: (1)

Forwarded:

[Signature]
 By direction

03-22794

45

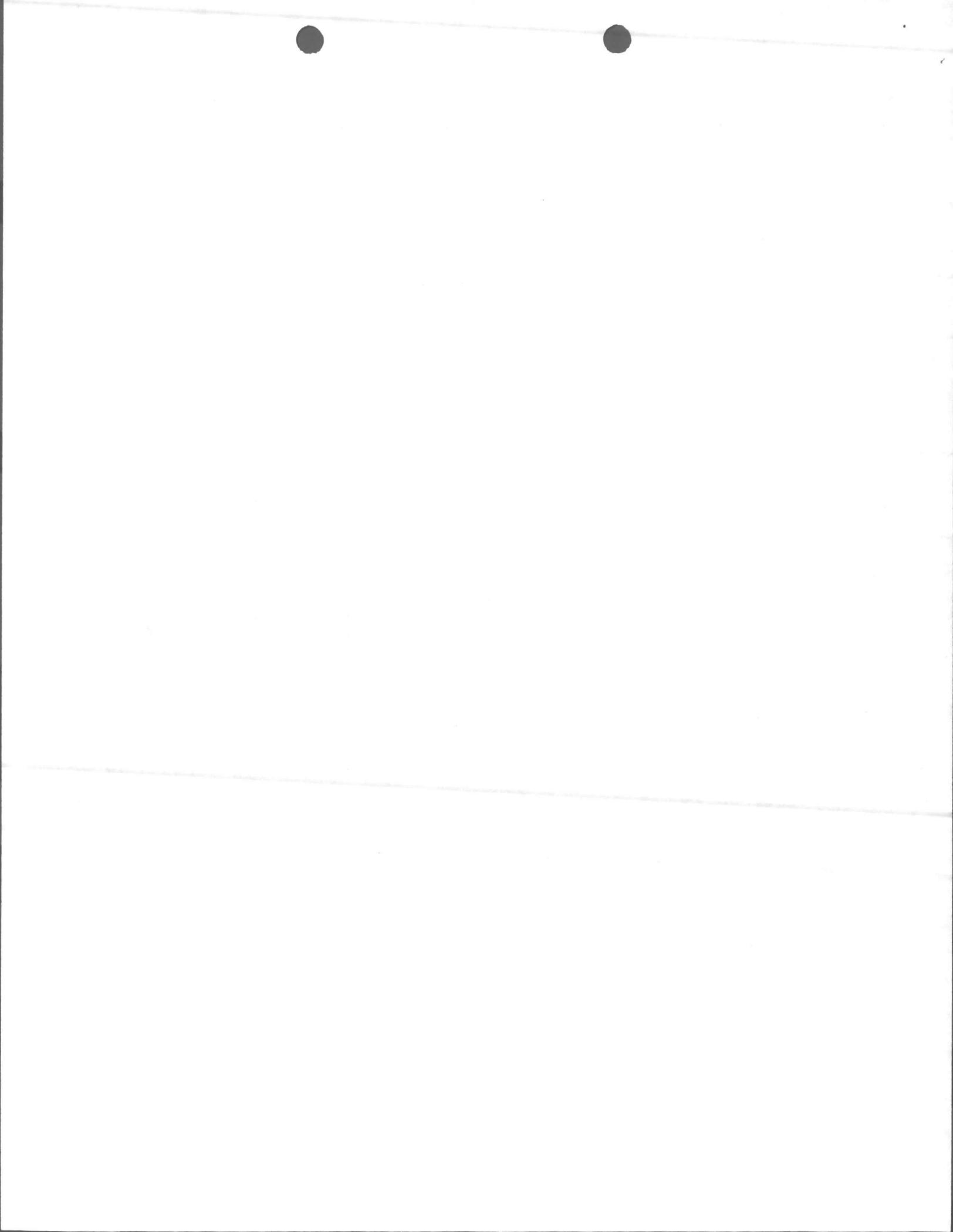
9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Albert Lee Santacruz</i>
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PART II---COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____ PROGRAMMING 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	



021126
 1515

Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 03-0071
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021125
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START EMERGENCY
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)

LOCATION: HP 301 ROOM 232

DESCRIPTION: NEED DOOR LOCK FIXED, DOOR KNOB WILL NOT LATCH

JUSTIFICATION: MARINE CANT CLOSE DOOR

45

021125
 1515

From: CG, 2d FSSG, FMFLan
 To: Base Maint Officer
 Via: (1)

Forwarded: *[Signature]*
 By direction

04-99803

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Albert Lee Santacruz</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 _____
b. Material		<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)
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

02-126
 1575

Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 03-0070
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG (AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021125
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START EMERGENCY
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)

LOCATION: HP 301 ROOM 202

DESCRIPTION: LOCK ON FRONT HATCH IS BROKEN WILL NOT LATCH

JUSTIFICATION: MARINES CAN NOT LOCK DOOR

45

02/125
 1ST Endorsed
 From: CG, 2d FSSG, FMFLan
 To: Base Maint Officer
 Via: (1)

Forwarded: *[Signature]*
 By director

03-22800

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Silbert Lee Santacruz</i>
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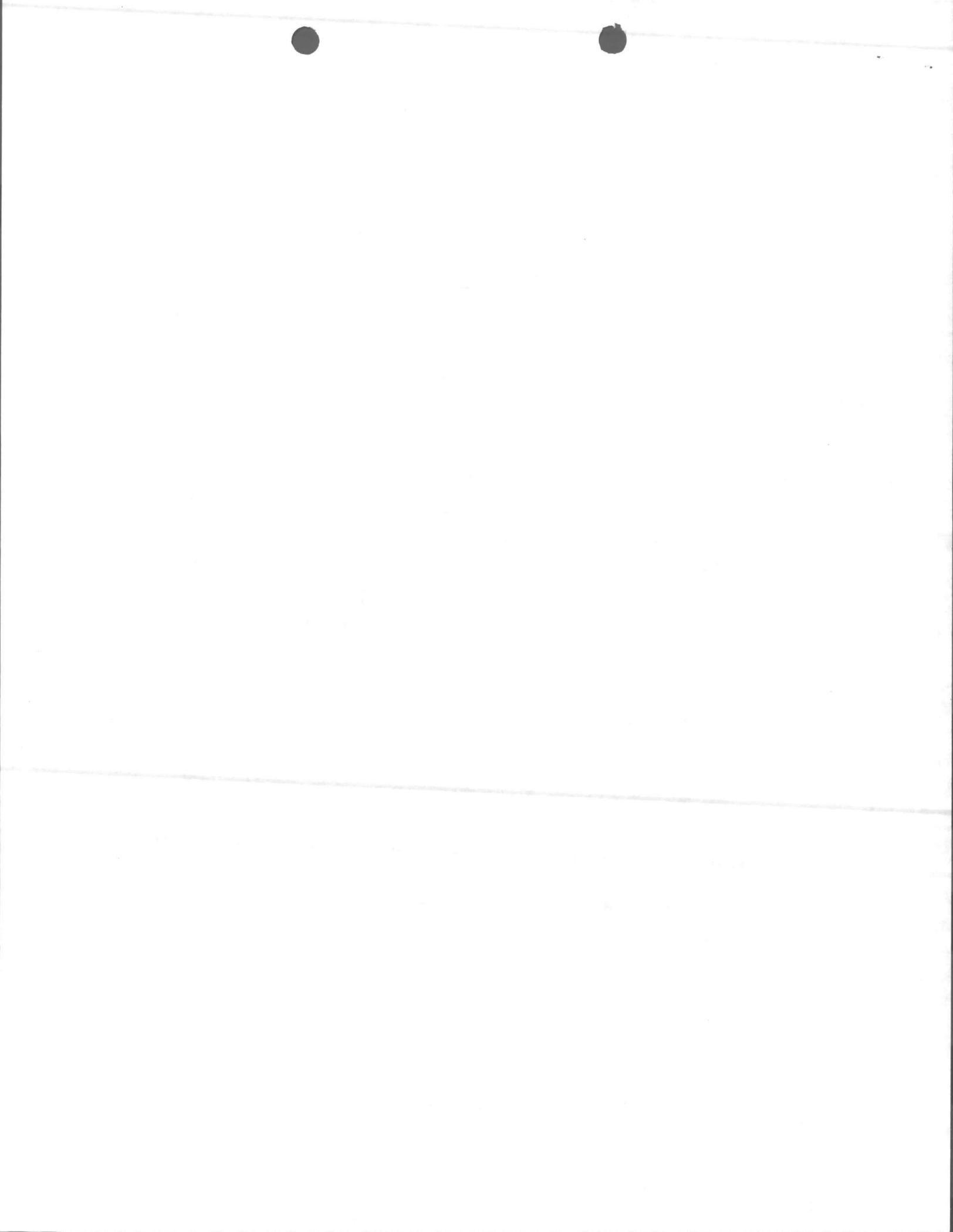
PART II---COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

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 _____
b. Material		<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)
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)



WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 (REV. 2/94 (EF)) (New S/N number pending)

PW Department see instructions in NAVFAC MO-321

021126
1515

Requestor see instructions on Reverse Side

PART I--REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 03-0068
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG (AC/S G-4 PAC. OFFICER)	4. DATE OF REQUEST 20021125
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PROGRAM NUMBER OF WORK	5a. REQUEST WORK START EMERGENCY
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 421-0607	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

LOCATION: HP 301 ROOM 223

DESCRIPTION: LOCK ON FRONT HATCH IS BROKEN WILL NOT LATCH

JUSTIFICATION: MARINES CAN NOT LOCK DOOR

U610

021125

1515 Endorsement

From: CG, 2d FSSG, FMFLant

To: Base Maint Officer

Via: (1)

Forwarded.

William G. Syt
By direction

45

03, 22 BDB

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Albert Lee Santacruz</i>
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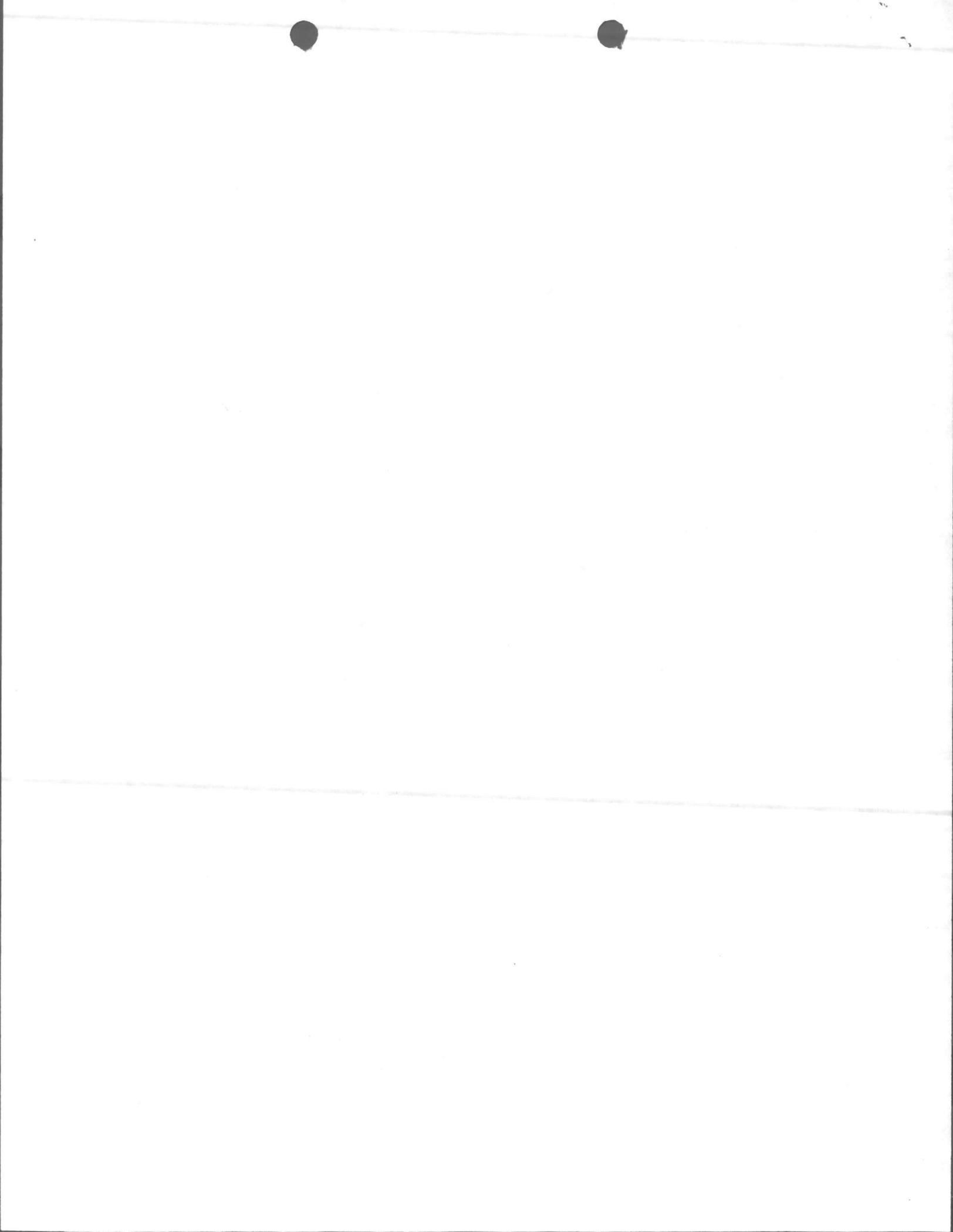
PART II--COST ESTIMATE

(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 _____
b. Material	<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge	PROGRAMMING TO START IN _____, IF
d. Equipment Rental/Usage	AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.
e. Contingency	<input type="checkbox"/> NOT REQUESTED (See Reverse Side)
f. Total	16. SIGNATURE
	17. DATE

PART III--ACT (Filled out by Requestor)

18. TO	19. AUTHORIZATION TO PROCEED IS <input type="checkbox"/> YES (Check one if that is the case) <input type="checkbox"/> NO	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	



02126
 1516

Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 03-0067
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021125
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START EMERGENCY
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)

LOCATION: HP 301 ROOM 233

DESCRIPTION: DOOR KNOB DOESN'T LATCH, LOOK AT LOCK

JUSTIFICATION: MARINES CAN NOT LOCK DOOR

45

021125
 151 Endorsement
 From: CG, 2d FSSG, FMFLant
 To: Base Maint Officer
 Via: (1)
 Forwarded.

Albert Lee Santacruz
 By direction

03-22801

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Albert Lee Santacruz</i>
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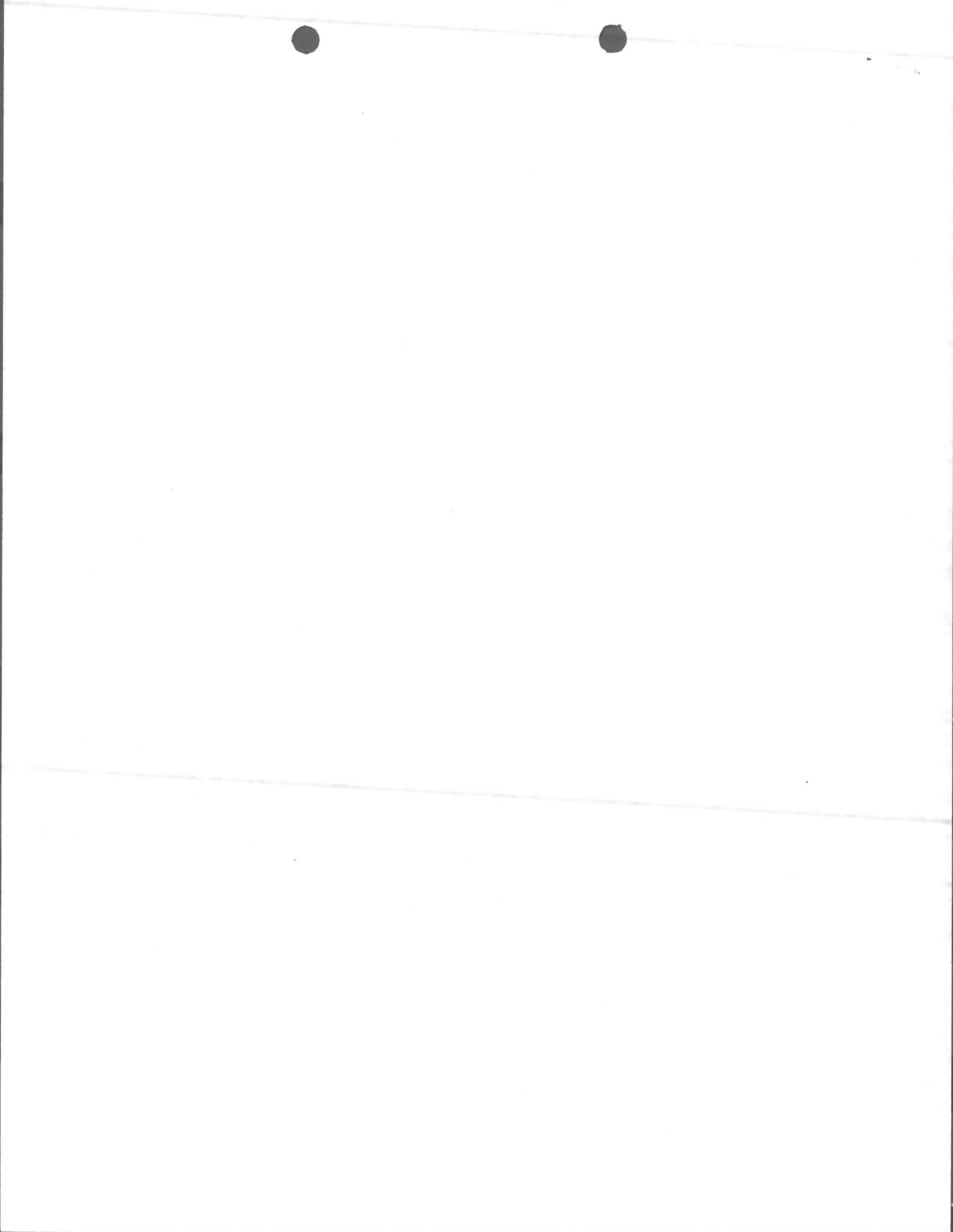
PART II---COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

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 _____
b. Material		<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS
e. Contingency		ARE MADE AVAILABLE.
f. Total	16. SIGNATURE	17. DATE
<input type="checkbox"/> DISAPPROVED. (See Reverse Side)		

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. 2/94 (EF)) (New S/N number pending)

021122
 157 Endorsement
 PW Department see instructions
 From: CG, 2d FSSG, FMFLA in NAVFAC MO-321
 To: Base Maint Officer
 Via: (1)

Requestor see instructions on Reverse Side

Forwarded: *[Signature]*
 By direction *[Signature]*

PART 1---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 02-0065
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021122
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START EMERGENCY
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.) LOCATION: HP-301 ROOM 136 DESCRIPTION: REQUEST TO HAVE LOCK LOOKED AT AND FIXED KEYS WILL NOT WORK ON LOCK JUSTIFICATION: MARINE NEEDS TO GET INTO ROOM, NO KEY WILL WORK ON LOCK 03-227907 021126 1517 45		
9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>[Signature]</i>	

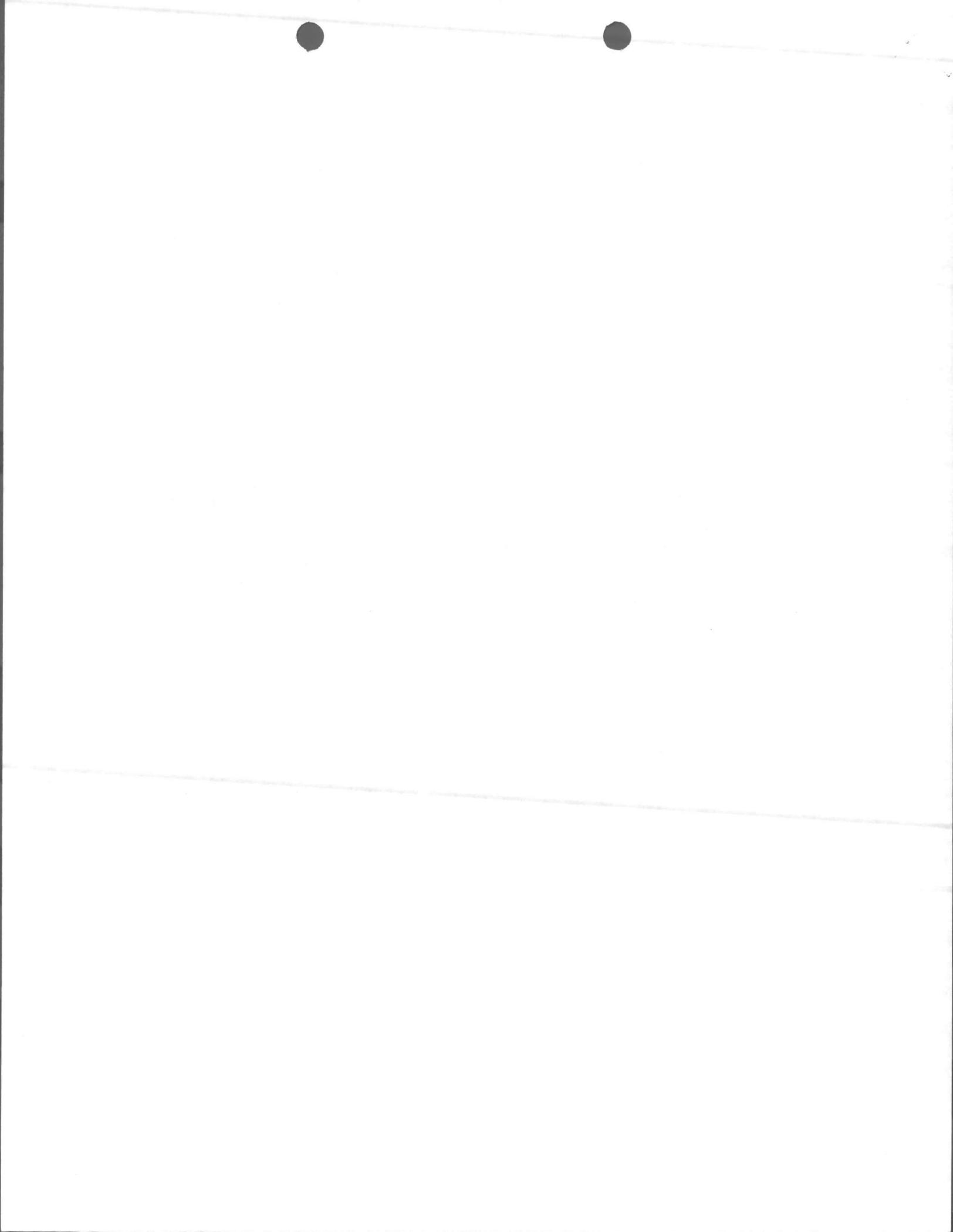
PART II---COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)
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)



WORK REQUEST (MAINTENANCE MANAGEMENT)

1555/30 Oct

PART I -- REQUEST (Filled out by Requester)

03-12977

1. FROM: CG, 2D FORCE SERVICE SUPPORT GROUP, G-4 Facilities	REQUEST NO: F001 055-02
3. TO: Maintenance Operations	2. DATE OF REQUEST: 021030
5. REQUEST FOR: <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START: Routine
FOR FURTHER INFORMATION CALL: GySgt Caasi 451-3315 Room 122	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.)

Location: Barracks HP 301 Room 302 = (2) keys 1E-338 Room 304 = (1) key 1E-339
 Room 306 = (2) keys 1E-340 Room 308 = (2) keys 1E-341
 Room 310 = (2) keys 1E-342

Description: Duplication of barracks room keys. Total = (9) keys "G" series.

Justification: Incorrect amount of keys in the key box; TAD personnel using the rooms returned to their units without returning the keys. ServMart does not carry the "G" series keys.

45
Lock

Caasi
AUTHORIZED SIGNATURE/STAMP: C.I. CAASI GySgt USMC

PART III -- ACTION (Filled out by Requester)

TO:

AUTHORIZATION TO PROCEED:

REQUEST BASE FUNDING

FUNDS WILL BE FORWARDED

WORK REQUESTED

HAS BEEN CANCELED

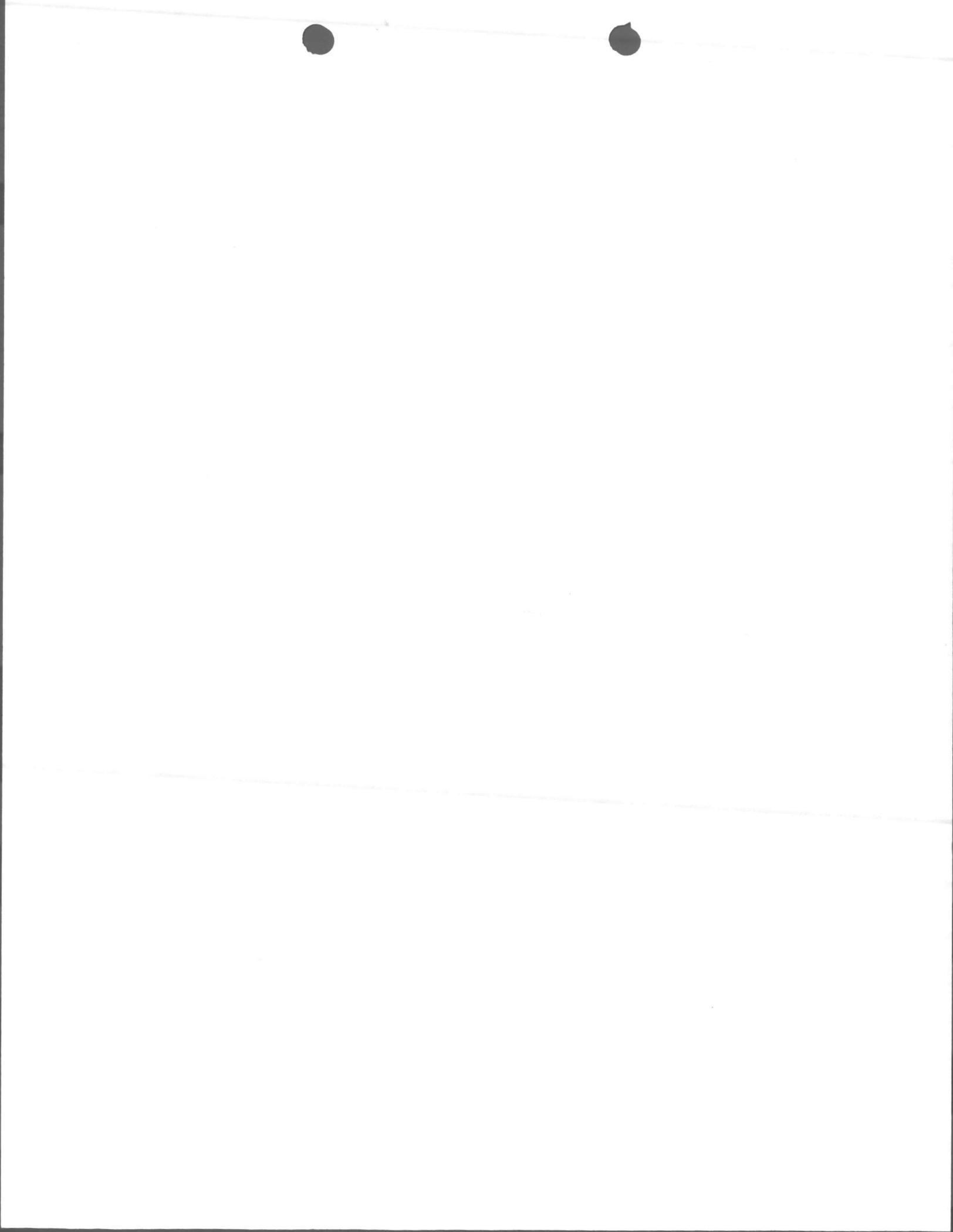
HAS BEEN DEFERRED

WILL BE PERFORMED BY SELF HELP

SIGNATURE

DATE

REMARKS



Requestor see instructions on Reverse Side

2002 OCT 23 PM 2 28

PART I---REQUEST (Filled out by Requestor)

PUBLIC WORKS DIV
 WORK RECEPTION

1. FROM COMMANDING OFFICER, POLICE BATTALION		2. REQUEST NO. F010 02-0065
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20021028
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START EMERGENCY
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)

LOCATION: HP-301 ROOM 136

DESCRIPTION: NEED DOOR UNLOCKED, AND DEAD BOLT LOCK WORKED ON

JUSTIFICATION: MARINE NEEDS TO GET INTO HIS ROOM, LOCK DOESN'T WORK.

221028
187

B-4

J.C. Hill

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official)
---------------------	-------------------------------------

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 PROGRAMMING TO START IN _____	
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF	
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS	
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
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)		20. WORK REQUESTED	
		<input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		<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)

8 4

3005 OCT 23 PM 5 58

WORK PROTECTION
PUBLIC RECORDS DIV

of cases to be found in the literature
and the fact that the disease is
not to be found in the literature
of the present day.

and on the other hand the fact that
it is not to be found in the literature
of the present day.

RECEIVED
 Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER HEADQUARTERS AND SERVICE BATTALION		2. REQUEST NO. FO14 C288-01	
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2D FSSG (AC/S G-4 FACILITIES OFFICER)		4. DATE OF REQUEST 20011214	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ROUTINE	
6. FOR FURTHER INFORMATION CALL PFC SIGARAN / 451-5155 C/Sgt De Rosa		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.)

LOCATION: HP301 ROOM 320

DESCRIPTION: REQUEST FROM SELF-HELP A LONG LIGHT BULB FOR OVERHEAD SINK LIGHT AND LIGHT COVER FOR HEAD.

JUSTIFICATION: HEALTH AND COMFORT.

02-99419

075

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) William J. De Rosa
---------------------	---

PART II---COST ESTIMATE

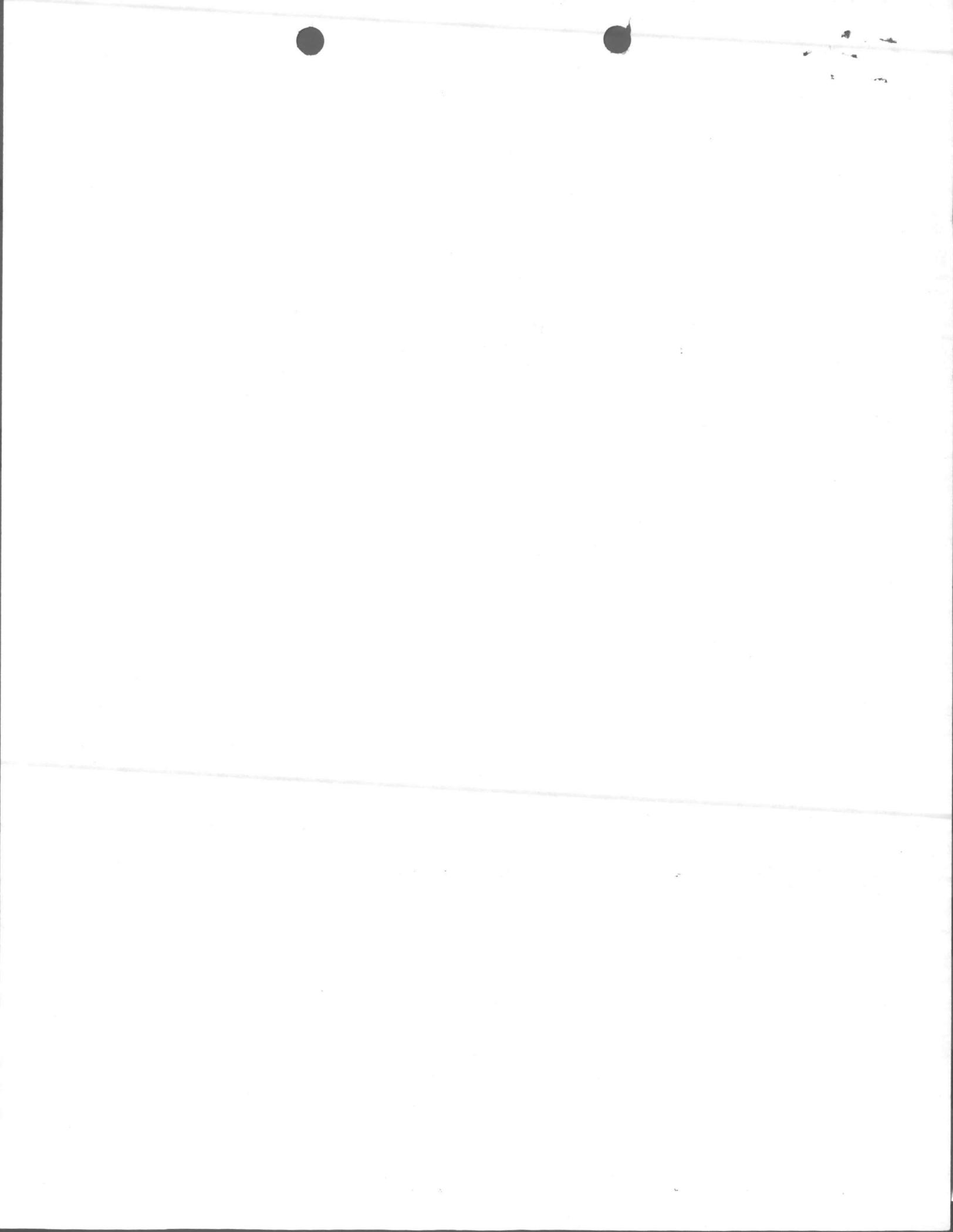
(Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____	
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF	
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS	
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
f. Total		16. SIGNATURE	17. DATE

PART III---ACTION (Filled out by Requestor)

18. TO		20. WORK REQUESTED	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		<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)



Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER HEADQUARTERS AND SERVICE BATTALION		2. REQUEST NO. FO14 C288-01	
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2D FSSG (AC/S G-4 FACILITIES OFFICER)		4. DATE OF REQUEST 20011214	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ROUTINE	
6. FOR FURTHER INFORMATION CALL PFC SIGARAN / 451-5155		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.)

LOCATION: HP301 ROOM 320

DESCRIPTION: REQUEST FROM SELF-HELP A LONG LIGHT BULB FOR OVERHEAD SINK LIGHT AND LIGHT COVER FOR HEAD.

JUSTIFICATION: HEALTH AND COMFORT.

9. FUNDS CHARGEABLE

10. SIGNATURE *William J. ...*

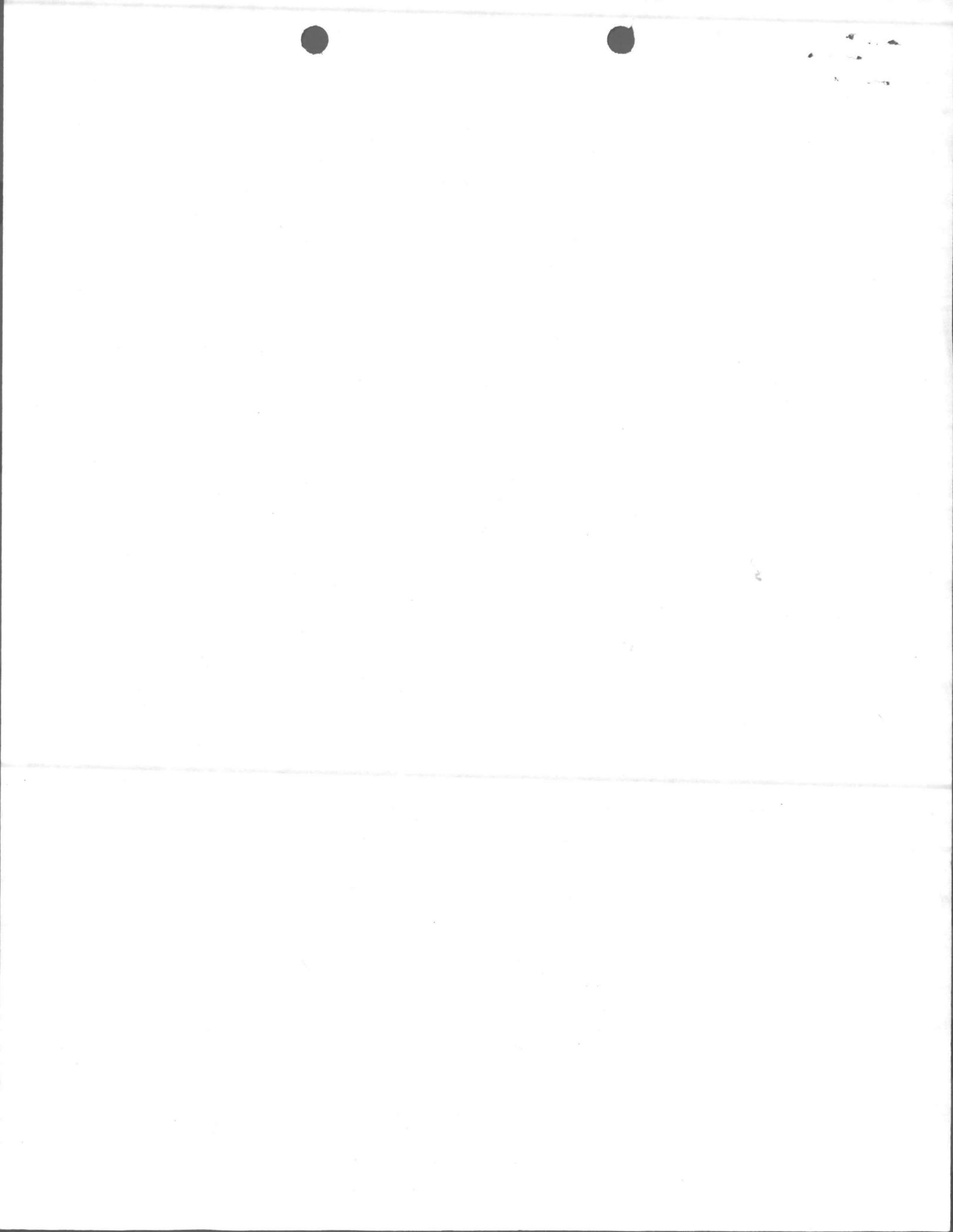
PART II---COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____	
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF	
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.	
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
f. Total		16. SIGNATURE	17. DATE

PART III---ACTION (Filled out by Requestor)

18. TO		20. WORK REQUESTED	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved) <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER		<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 Order Ticket

Shop: 93

Work Order: 02-99419
POC: PFC SIGARAN
Phone: 451-5155
Entered By: LEWISGM

Status: INPRG
Report Date: 04-JAN-2002 03:31 PM
Respond By:
Target Comp Date:

Service Requested: REQ SELF HELP A LONG LIGHT BULB FOR OVERHEAD SINK LIGHT AND LIGHT COVER FOR HEAD
No additional information available.

Building/Location: HP301 Bldg Descrip: BEQ E1-E4
Equipment #: Equip Descrip:
Actual Location: RM 320
PM #: Job Plan #:

Assigned To: OBINKUMA Supervisor: SPOONERDP Craft:

FINANCIAL INFORMATION

For ISD Use Only

For SSC Use Only

JON: A279


02-99419


AD323A2792320T


99419

Ensure all lock-out/tag-out procedures are followed, wear proper PPE, and review MSDS as required.

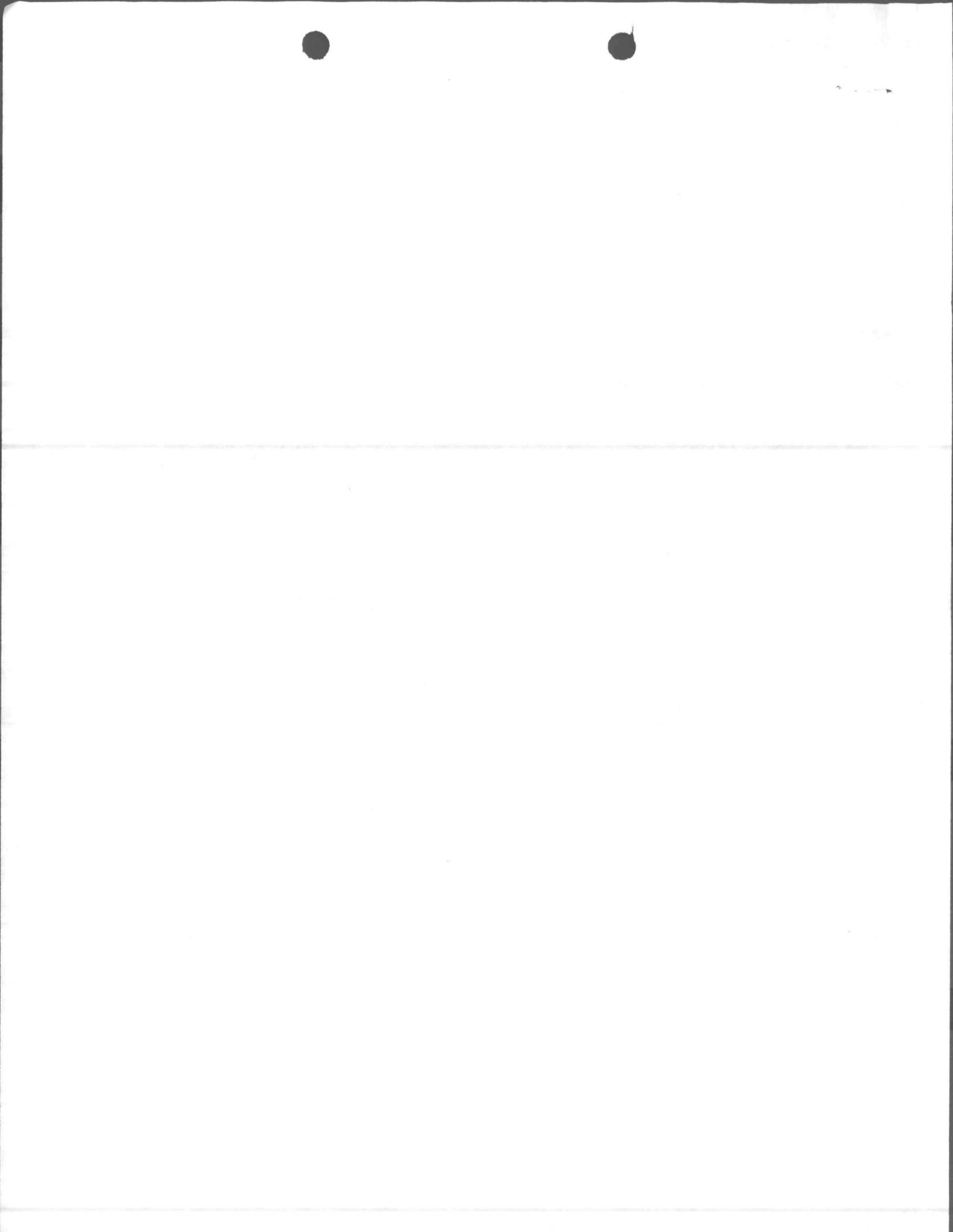
Job Started: _____ Job Completed: _____ Units: _____

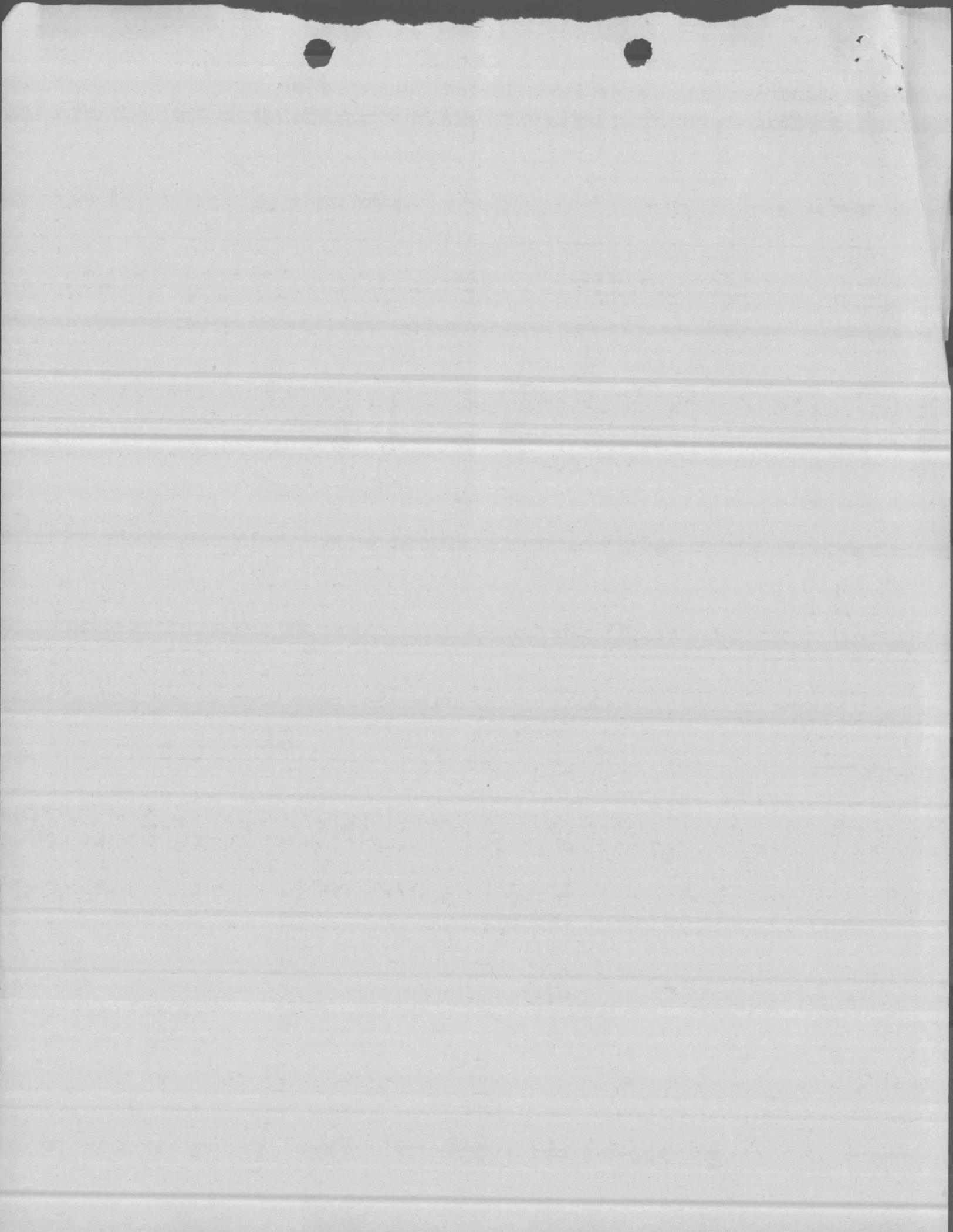
Name	Date	Start1	Stop1	Date	Start2	Stop2	Date	Start3	Stop3	Date	Start4	Stop4

Work Remarks (continue on back if needed): _____

Customer Acceptance:

Signature: _____ Date: _____





Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

2002 OCT 9 PM 3 55

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 02-0039	
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)		DATE OF REQUEST 20021007	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ROUTINE	
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ X0607		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

PUBLIC WORKS DIV
 WORK RECEPTION

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

LOCATION: HP-301, ROOM 225

DESCRIPTION: REQUEST FOR REPLACEMENT OF WARPED EXTERIOR HATCH.

JUSTIFICATION: MARINE CAN'T CLOSE DOOR.

03-5940 Rev

02/10/09
 Endorsement:
 From: CG, 2d FSSG, FMFLan
 To: Base Maint Officer
 Via: (1)
 Forwarded: J.C. Hill
 By direction

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official)
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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 _____	
b. Material		<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____	
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF	
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.	
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
f. Total	16. SIGNATURE	17. DATE	

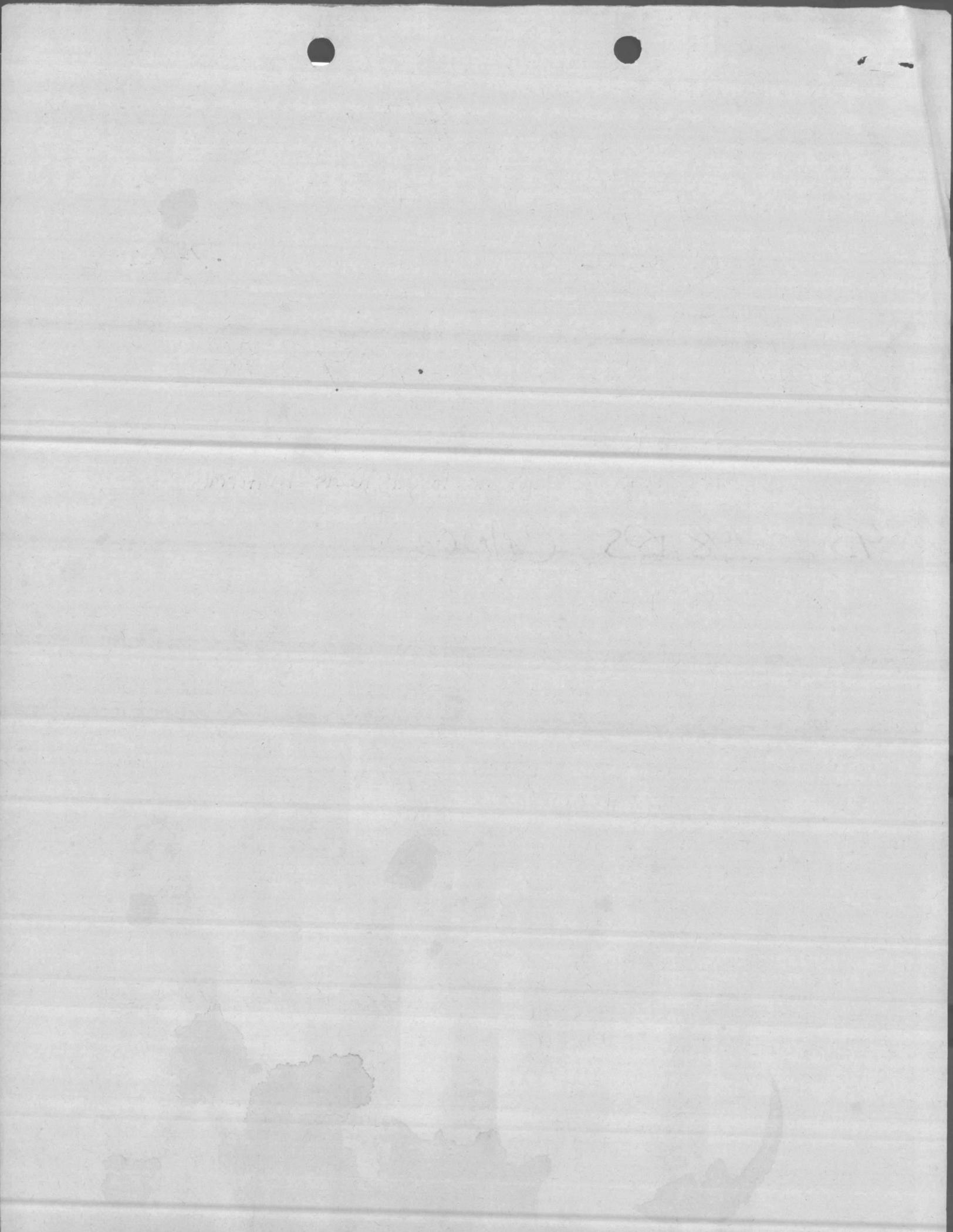
PART III---ACTION (Filled out by Requestor)

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)

SOOS OCT 8 PM 3 22

WORK RECEPTION
PUBLIC WORKS DIV



WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 (REV. 2/94 (EF)) (New S/N number pending)

Date 020206

Endorsement

From: CG, 2d FSSG, Ft. Leans

PW Department see instructions in NAVFAC MO-321

To: Base Maint Officer

Via: (1)

Requestor see instructions on Reverse Side Forwarded.

[Handwritten Signature]

PART I--REQUEST (Filled out by Requestor)

By direction

1. FROM COMMANDING OFFICER HEADQUARTERS AND SERVICE BATTALION	2. REQUEST NO. FO14 C046-02
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2D FSSG (AC/S G-4 FACILITIES OFFICER)	4. DATE OF REQUEST 20020206
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL PVT SANDERS / 451-5973 <i>Lt Col Carlson</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.)

LOCATION: HP301, FOR 45 ROOMS

DESCRIPTION: REQUEST FROM SELF-HELP WEATHER STRIPPING IN THE AMOUNT OF (45) DOORS FOR THE ROOMS.

JUSTIFICATION: TO KEEP THE COLD, WIND AND OUTSIDE ELEMENTS OUTSIDE..

OPS

RECEIVED
 FEB 7 AM 8 50
 BASE MAINT
 OPERATION DIVISION

9. FUNDS CHARGEABLE

10. SIGNATURE (Requesting Official)

William J. Fiddes

PART II--COST ESTIMATE

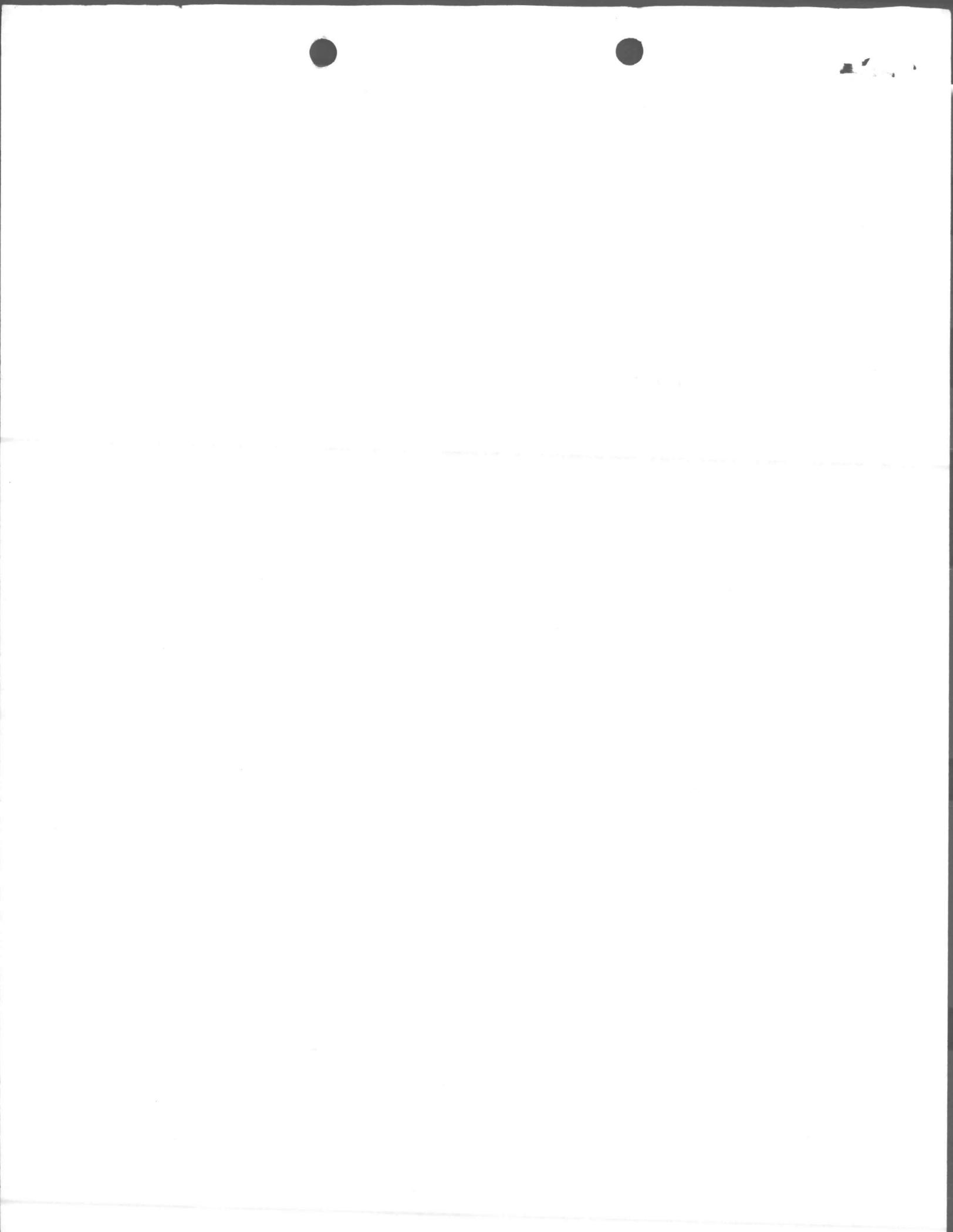
(Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge	PROGRAMMING TO START IN _____, IF
d. Equipment Rental/Usage	AUTHORIZED BY 25TH OF _____ AND FUNDS
e. Contingency	<input type="checkbox"/> DISAPPROVED. (See Reverse Side)
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)



WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 (REV. 2/94 (EF)) (New S/N number pending)

Date 020206

Endorsement

From: CG, 2d FSSG, Ft. Belknap

PW Department see instructions in NAVFAC MO-321

To: Base Maint Officer

Via: (1)

Requestor see instructions on Reverse Side Forwarded.

[Signature]

PART I--REQUEST (Filled out by Requestor)

By direction

1. FROM	COMMANDING OFFICER HEADQUARTERS AND SERVICE BATTALION	2. REQUEST NO.	FO14 C046-02
3. TO	COMMANDING GENERAL, MCB COMMANDING GENERAL, 2D FSSG (AC/S G-4 FACILITIES OFFICER)	4. DATE OF REQUEST	20020206
5. REQUEST FOR	<input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START	ROUTINE
6. FOR FURTHER INFORMATION CALL	PVT SANDERS / 451-5973	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.)
 LOCATION: HP301, FOR 45 ROOMS
 DESCRIPTION: REQUEST FROM SELF-HELP WEATHER STRIPPING IN THE AMOUNT OF (45) DOORS FOR THE ROOMS.
 JUSTIFICATION: TO KEEP THE COLD, WIND AND OUTSIDE ELEMENTS OUTSIDE..

RECEIVED
 02 FEB 7 09 18 50
 BASE MAINT
 OPERATIONS DIVISION

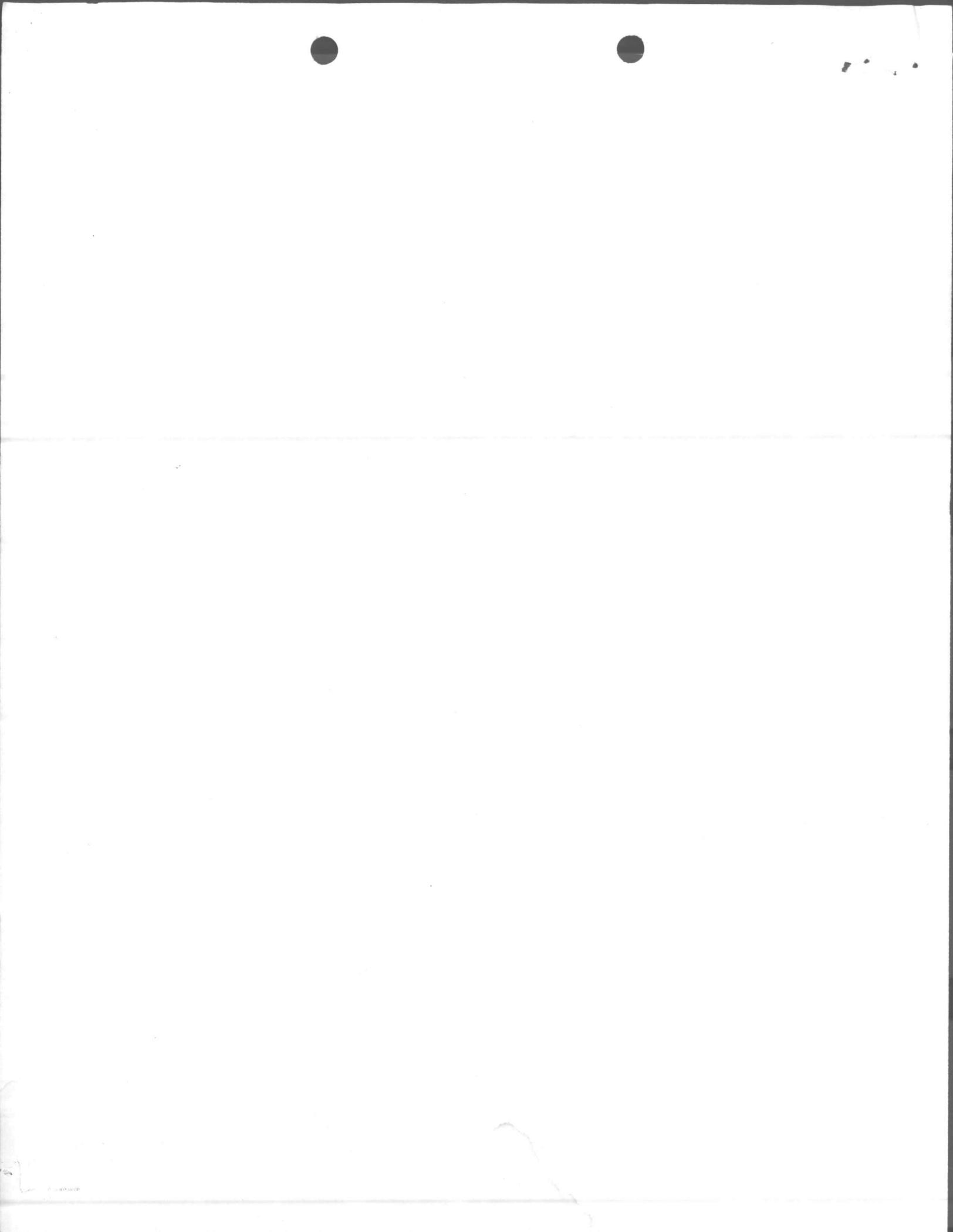
9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>William Sanders</i>
---------------------	---

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 PROGRAMMING TO START IN _____ PROGRAMMING 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)	20. WORK REQUESTED
	<input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	<input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
21. SIGNATURE	22. DATE	



Requestor see instructions on Reverse Side

2002 OCT 9 PM 3 55

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 02-0052	
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S FAC. OFFICER)		4. DATE OF REQUEST 20021009	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ROUTINE	
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.) LOCATION: HP-301, 2ND DECK CENTER PASSAGEWAY DESCRIPTION: DOOR KNOB ON MAINTENANCE ROOM IS MISSING JUSTIFICATION: MAINTENANCE CAN'T OPEN DOOR 03-5201 45 157 Endorsement From: CG, 2d FSSG, FM/Plan To: Base Maint Officer Via: (1) Forwarded J.C. Hill By direction			
9. FUNDS CHARGEABLE		10. SIGNATURE (Requesting Official) Gilbert Lee Santacruz	

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 PROGRAMMING TO START IN _____	
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF	
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.	
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
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	
		22. DATE	

(See Part IV on Reverse Side)

22 3 PM 9 2005

PUBLIC WORKS DIV
WORK RECEPTION

Requestor see instructions on reverse side

2002 OCT 9 PM 3 55

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION		2. REQUEST NO. F010 02-0051	
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG (AC/S FAC. OFFICER)		4. DATE OF REQUEST 20021009	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ROUTINE	
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

PUBLIC WORKS DIV
 WORK RECEPTION

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

LOCATION: HP-301, ROOM 202

DESCRIPTION: DOOR LOCK DOESN'T WORK PROPERLY, REQUESTING TO HAVE LOCK REPLACED

JUSTIFICATION: ROOM CAN NOT BE SECURED

035202

45

ENCLOSURE
 From: CG, 2d-FSSG, FMFLan
 To: Base Maint Officer
 Via: (1)
 1: Forwarded.
 J. C. Hill
 by direction

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) Robert Lee Santacruz
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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.	
b. Material		<input type="checkbox"/> APPROVED	PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge		<input type="checkbox"/> APPROVED	PROGRAMMING TO START IN _____
d. Equipment Rental/Usage			PROGRAMMING TO START IN _____, IF
e. Contingency			AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.
f. Total		16. SIGNATURE	17. DATE
		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	

PART III---ACTION (Filled out by Requestor)

18. TO		20. WORK REQUESTED	
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved)		<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)

22 OCT 9 PM 3 22

WORK RECEPTION
PUBLIC WORKS DIV

Requestor see instructions on Reverse Side

2002 OCT 9 PM 3 55

PART I---REQUEST (Filled out by Requestor)

PUBLIC WORKS DIV
 WORK RECEPTION

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION
 2. REQUEST NO. F010 02-0050
 3. TO COMMANDING GENERAL, MCB
 COMMANDING GENERAL, 2FSSG(AC/S FAC. OFFICER)
 4. DATE OF REQUEST 20021009
 5. REQUEST FOR COST ESTIMATE PERFORMANCE OF WORK
 5a. REQUEST WORK START ROUTINE
 6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607
 7. SKETCH/PLAN ATTACHED YES NO

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)
 LOCATION: HP-301, ROOM 330
 DESCRIPTION: DOOR KNOB COMES OFF WHEN ITS TURNED
 JUSTIFICATION: MARINES CAN'T SECURE DOOR
 03-5203 45
 02/00/09
 1ST
 From: CO, 2d FSSG, 2FSSG
 To: Base Maint Office
 Via: (1)
 Is Forwarded.
 By direction
 J.C. Hill

9. FUNDS CHARGEABLE
 10. SIGNATURE (Requesting Official)
 Albert Lee Santacruz

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 YES NO
 15. APPROVED PROGRAMMING TO START IN _____
 APPROVED PROGRAMMING TO START IN _____
 PROGRAMMING 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)

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

WORK RECEPTION
PUBLIC WORKS DIV
OCT 9 PM 3 22

26 SEP 2002
@ 1045

PART I -- REQUEST (Filled out by Requester)

1. FROM: Commanding Officer, 2d Dental Battalion	2. REQUEST NO: F018: 2422-02
3. TO: Commanding General, MCB, Attn: Base Maintenance Commanding General, 2d FSSG, Attn: (AC/S Facilities)	4. DATE OF REQUEST: 25 Sep 02
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK ROUTINE
6. FOR FURTHER INFORMATION CALL DTI EASTERLING 451-0220	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.)

Location: HP 301, room 130

Description: Remove Freon from three refrigerators. **Serial #** ① 910909953, COST: \$150.00
② 910909865, COST: 150.00
③ 910909941, COST: 150.00

Justification: Requirement for turn in to DRMO.

Mark Easterling DTI
AUTHORIZED SIGNATURE/STAMP

PART II -- COST ESTIMATE (Attach if required) & APPROVAL
(Filled out by Maintenance Control Division) DTI EASTERLING 451-0220

- APPROVED
 DISAPPROVED

02-182409

53

SIGNATURE
COMMENTS

DATE

PART III -- ACTION (Filled out by Requester)

- TO
AUTHORIZATION TO PROCEED
 REQUEST BASE FUNDING
 FUNDS WILL BE FORWARDED
WORK REQUESTED
 HAS BEEN CANCELLED
 HAS BEEN DEFERRED
 WILL BE PERFORMED BY SELF HELP
SIGNATURE

DATE 020926
1ST Endorsement
From: CG, 2d FSSG, FMFLant
To: Base Maint Officer
Via: (1)

Forwarded:

[Signature]
By direction

DATE

REMARKS

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Received
 020924
 0900

Requestor see instructions on Reverse Side

PART I--REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER 2D MILITARY POLICE BATTALION		2. REQUEST NO. F010 02-0042
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)		4. DATE OF REQUEST 20020922
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607		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.)

LOCATION: **HP-301 ROOM 202**

DESCRIPTION: **LOCK ON FRONT DOOR NOT FUNCTIONING PROPERLY, HAS PROBLEM WITH LOCKING. 24 Sep 02**

JUSTIFICATION: **MARINES CAN NOT SECURE DOOR.**

02-181349

AS

BT
 From: **OG, 2d FSSG, FMFLAW**
 To: **Base Maint Officer**
 Via: **(1) [Signature]**
 1. Forwarded: **[Signature]**

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) Robert L. Santacruz By direction
---------------------	---

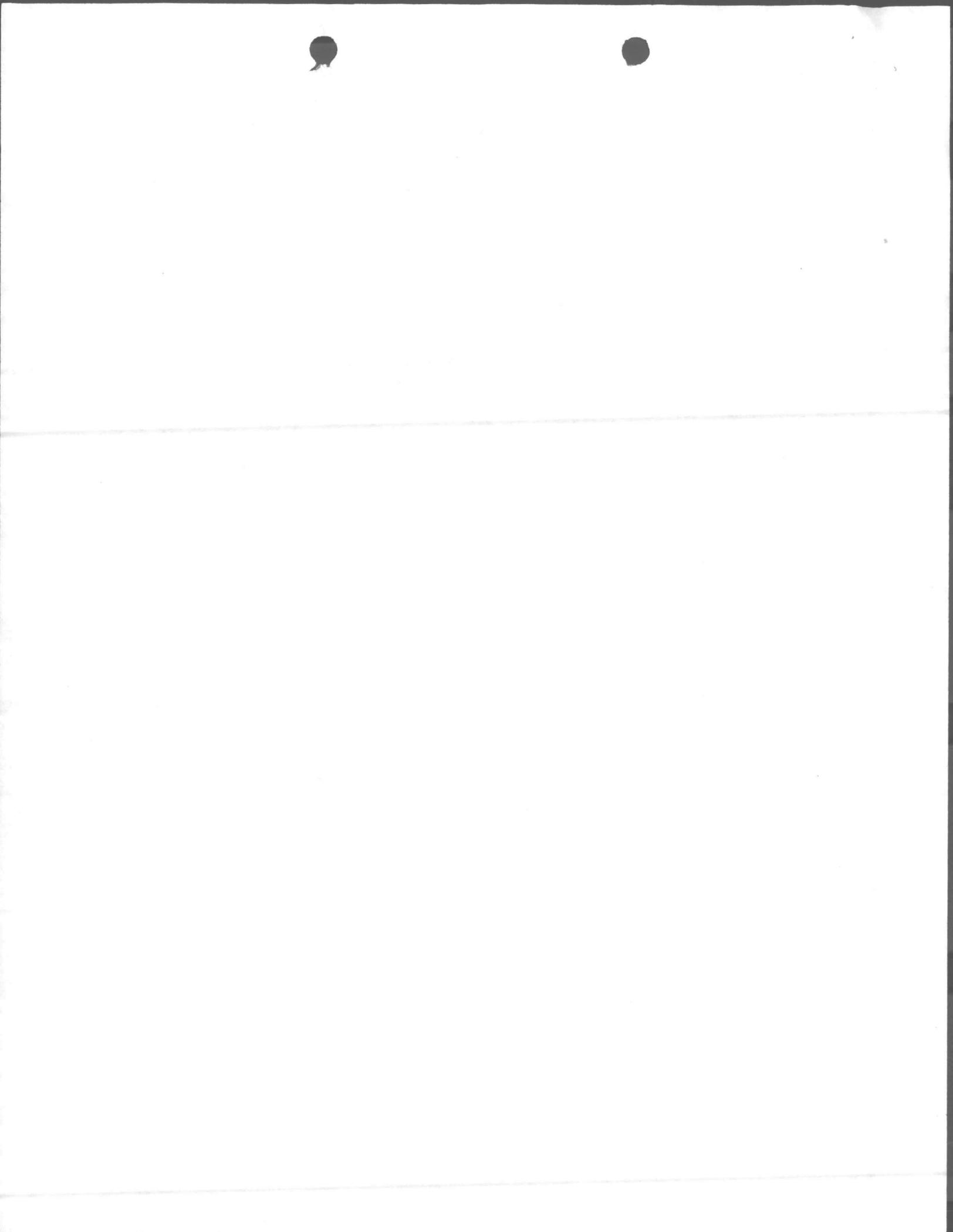
PART II--COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____ PROGRAMMING TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS <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)



Received
 020924
 0900

PW Department see instructions
 in NAVFAC MO-321

Requestor see instructions on Reverse Side

PART I--REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER 2D MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-0043
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)	4. DATE OF REQUEST 20020923
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607	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.)

LOCATION: HP-301 ROOM 225

DESCRIPTION: REPLACEMENT OF WARPED EXTERIOR HATCH

JUSTIFICATION: MARINES CAN NOT SECURE DOOR.

02-181345 W3

Date 24 Sept 02
 157 Endorsement
 From: CG, 2d FSSG, FMFLant
 To: Base Maint Officer
 Via: (1) *[Signature]*
 1 Forwarded *[Signature]* Capt USMC
 By direction

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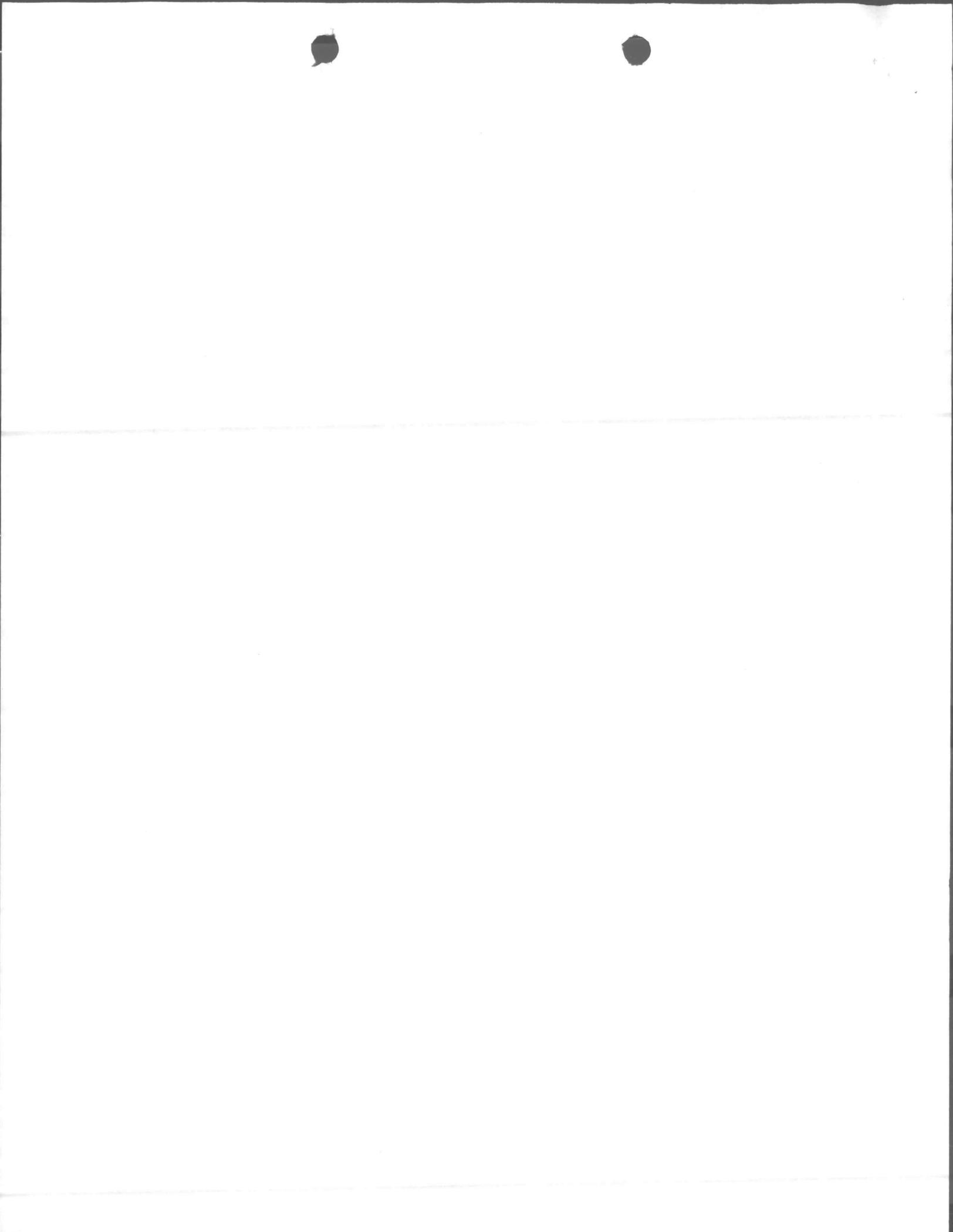
PART II--COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

11. TO	12. ESTIMATE NO.
13. COST ESTIMATE	
a. Labor	14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
b. Material	15. <input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____
c. Overhead and/or Surcharge	<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____, IF
d. Equipment Rental/Usage	AUTHORIZED BY 25TH OF _____ AND FUNDS
e. Contingency	<input type="checkbox"/> DISAPPROVED. (See Reverse Side)
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)



02-173236

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Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

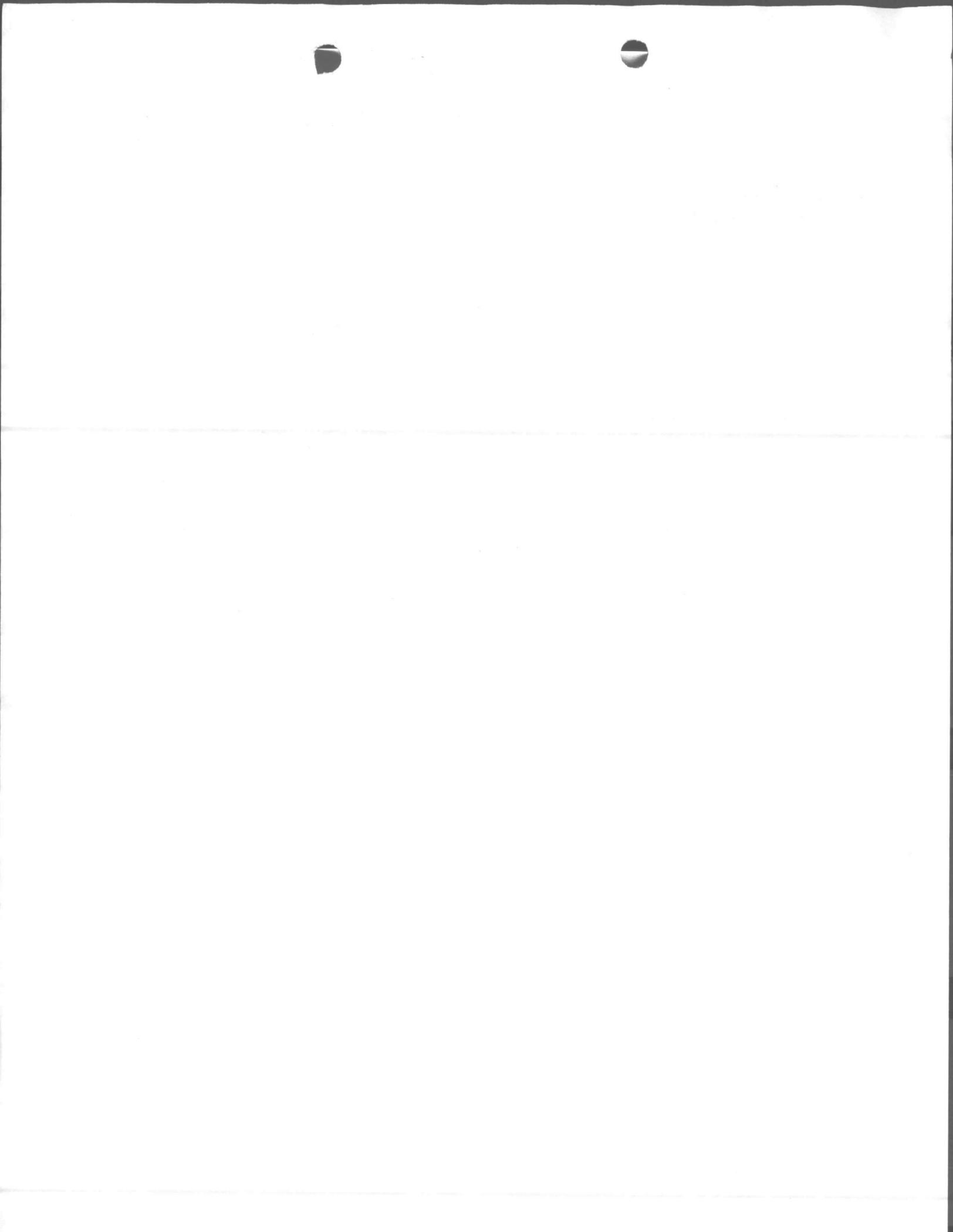
1. FROM COMMANDING OFFICER ^{G.9A} 2D MILITARY POLICE BATTALION S-4 Chief		2. REQUEST NO. A-10
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG (A C/S G-4 FAC, OFFICER)		4. DATE OF REQUEST 30 AUG 02
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE	<input checked="" type="checkbox"/> PERFORMANCE OF WORK Emergency Door Will Not Open from Inside	5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL 1st Sgt Jackson 451-7049		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.)		
LOCATION: HP 301 Rm 320		
DESCRIPTION: Door Will Not Unlock from Inside Room		
JUSTIFICATION: Marine must climb out of window to get out of his room, increasing safety hazard or injury to marine. (Cpl Bates is marine in room.)		
9. FUNDS CHARGEABLE		10. SIGNATURE (Requesting Official) 1st Sgt Todd G. Hodgkinson

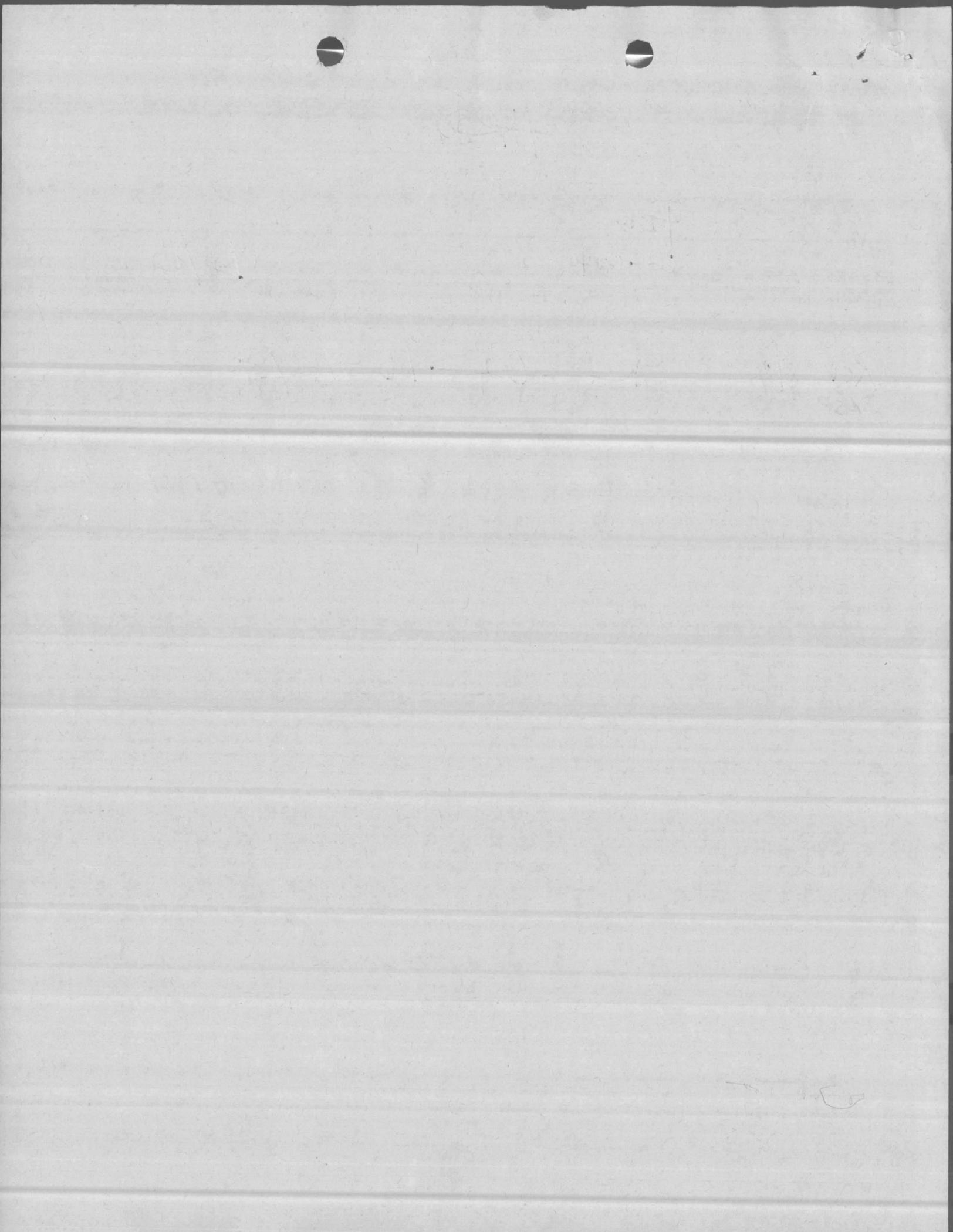
PART II---COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____	
c. Overhead and/or Surcharge		PROGRAMMING TO START IN _____, IF	
d. Equipment Rental/Usage		AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.	
e. Contingency		<input type="checkbox"/> DISAPPROVED. (See Reverse Side)	
f. Total		16. SIGNATURE	17. DATE

PART III---ACTION (Filled out by Requestor)

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





68/20102
 Endorsement:
 From: Cdr, 2d FSSG, FMFLan
 To: Base Maint Officer
 Via: (1)
 Forwarded: *[Signature]*
 PW Department see instructions in NAVFAC MO-321

Requestor see instructions on Reverse Side

PART I--REQUEST (Filled out by Requestor)

By direction

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00040
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)	4. DATE OF REQUEST 20020820
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607	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.)
 LOCATION: HP-301, ROOM 225
 DESCRIPTION: REQUESTING TO HAVE DOOR REPLACED, OLD DOOR IS WARPED AND CRACKED AND WILL NOT SHUT.
 JUSTIFICATION: SECURITY OF PERSONAL EFFECTS

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Review

*02-16-94
169649
1110*

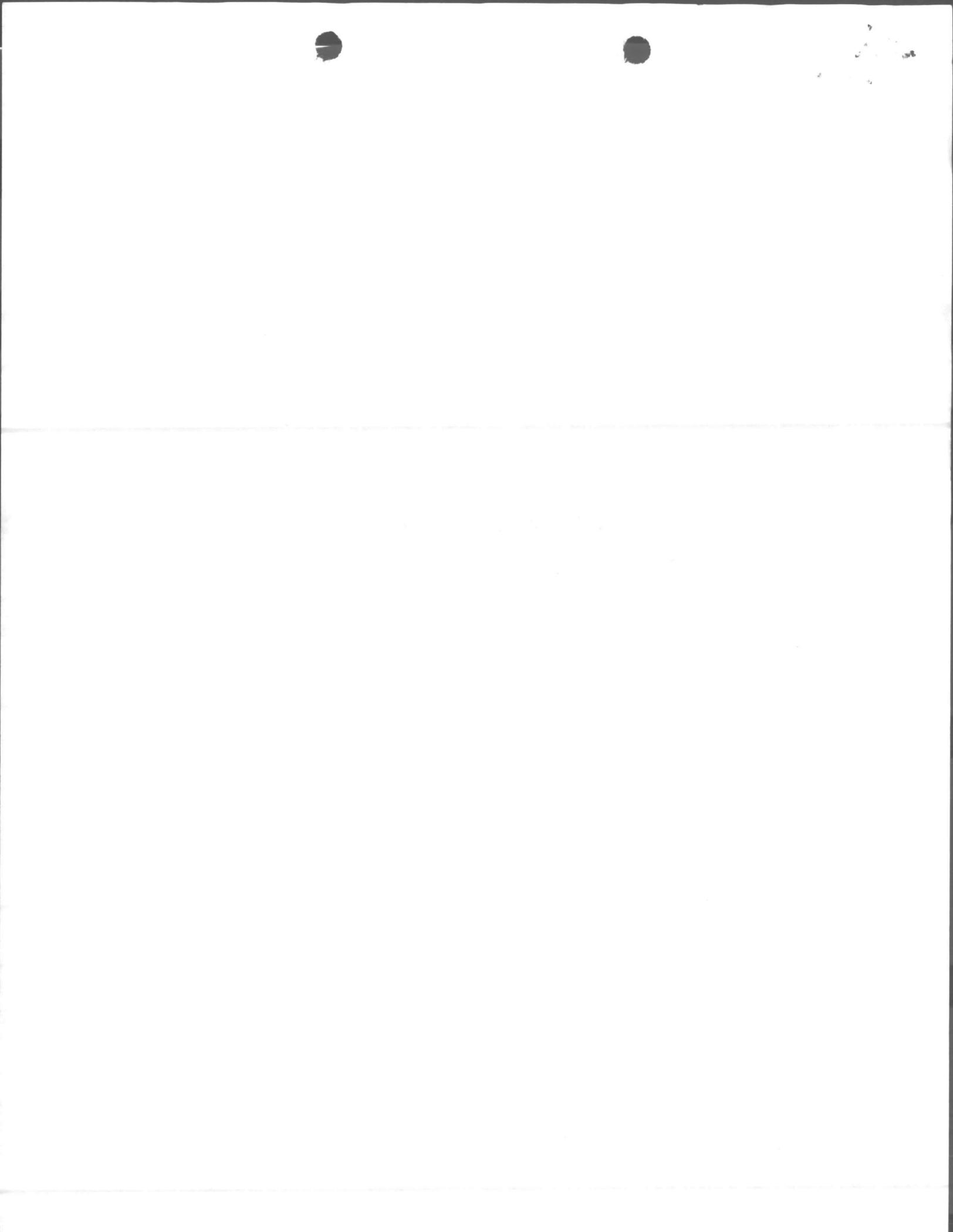
10. SIGNATURE (Requesting Official)
Robert L Santacruz Cpl

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 PROGRAMMING TO START IN _____ PROGRAMMING 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	





UNITED STATES MARINE CORPS
Marine Corps Base
PSC Box 20004
Camp Lejeune, North Carolina 28542-5008

5800
MAIN
AUG 20 2002

MEMORANDUM

From: Public Works Officer, Marine Corps Base, Camp Lejeune
To: Commanding Officer, Military Police Battalion, 2nd Force
Service Support Group, Camp Lejeune
Via: Commanding General, 2nd Force Service Support Group, Camp
Lejeune (Attn: G-4/Facilities)

Subj: REPORT OF MISSING OR DAMAGED PROPERTY/FACILITIES

Ref: (a) NAVCOMP Manual, Volume III, par. 035880.8c
(b) MCO P4400.150.D

1. The following report of missing or damaged property or facilities is forwarded for your information and/or action.

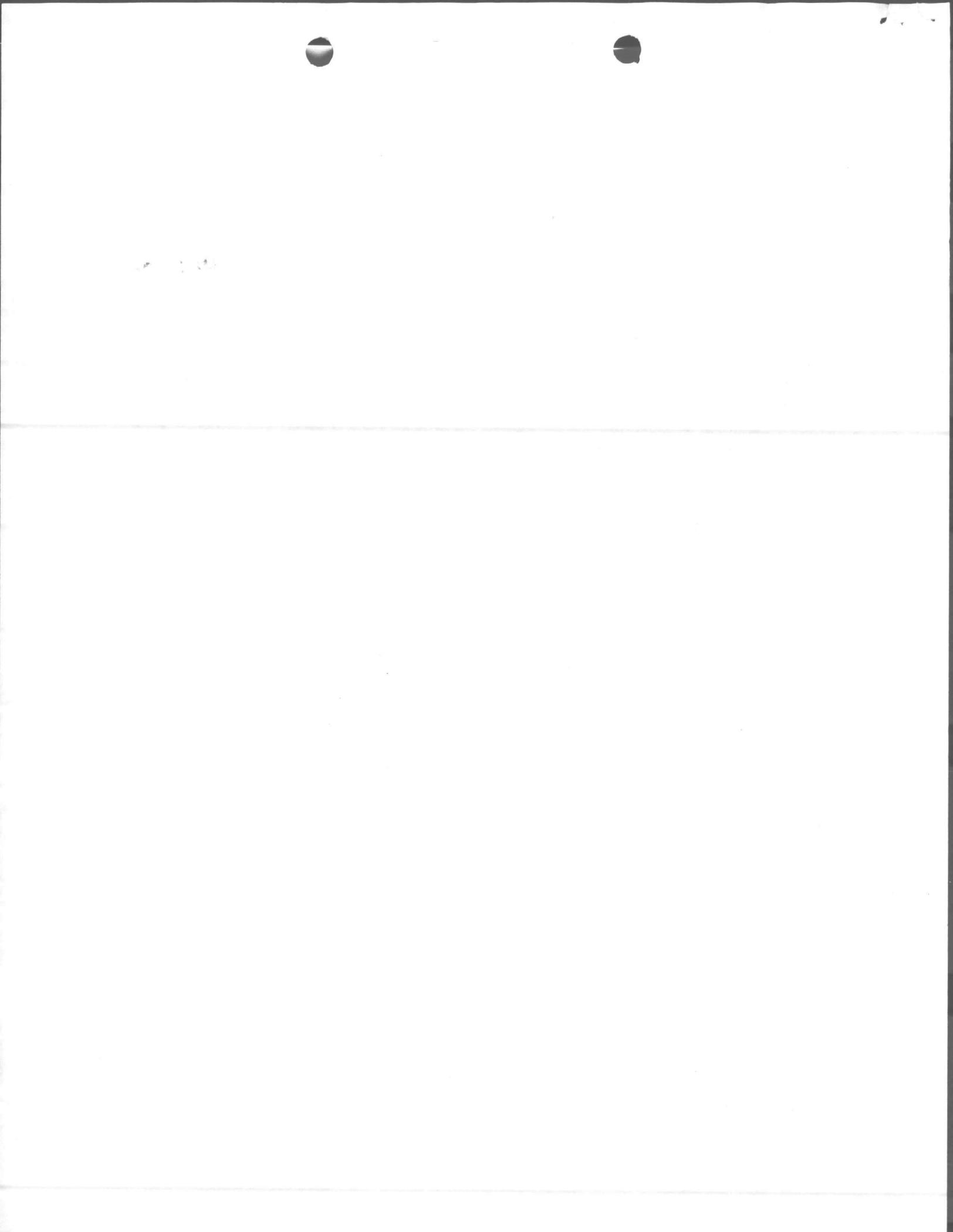
- a. Item(s) damaged: Window panel broken out
- b. Location: HP301 Room 219
- c. Nature of damage: Marine broke window out of frame
- d. Estimated cost:

Material	\$46.88
20% surcharge	\$9.38
Labor	\$44.12
30% surcharge	<u>\$13.24</u>
TOTAL	\$113.61

2. Estimated costs have surcharges applied in accordance with reference (a).

3. Individuals electing to reimburse the Government will do so in accordance with reference (b).

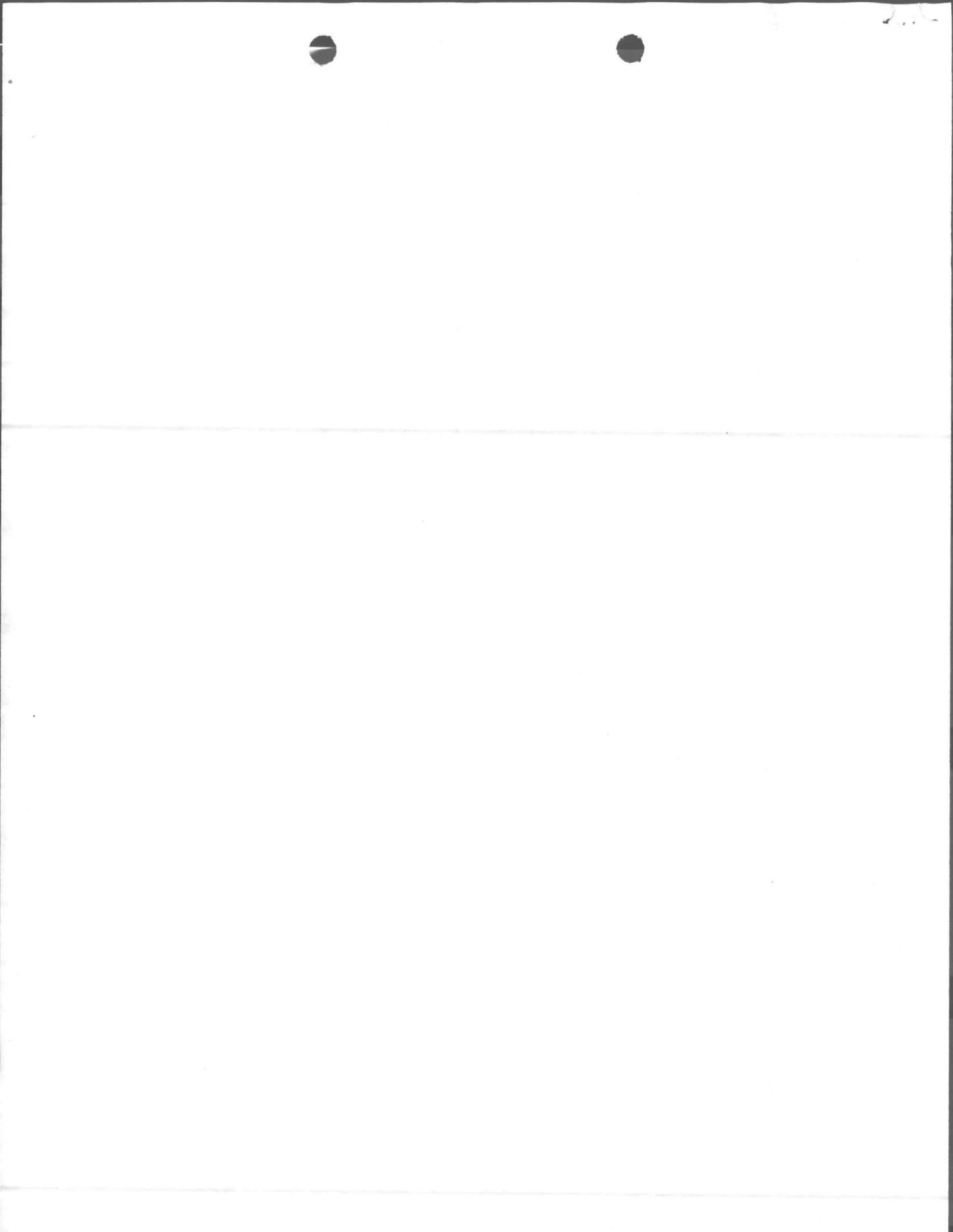
E. W. WINBERRY
Director, Operations Branch



Blind Copy to:
→ Work Reception
P&E (R. Whaley)

Writer: D. Brown, 451-0872

Typist: C. Marentis, 20Aug02, D:/Letters/damage, Max#02-165661



WORK REQUEST (MAINTENANCE MANAGEMENT)

NAVFAC 9-11014/20 (REV. 2/84 (EF)) (New S/N number pending)

Date 08/20/02

Endorsement

From: CG, 2d FSSG, FMFLant
 To: Base Maint Officer
 Via: (1) *[Signature]*
 Forwarded *[Signature]*
 PW Department see instructions in NAVFAC MO-321
 By direction *[Signature]*

Requestor see instructions on Reverse Side

PART I--REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00034
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)	4. DATE OF REQUEST 20020820
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607	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.)
 LOCATION: HP-301 ROOM 223
 DESCRIPTION: DOOR WILL NOT LATCH, DOOR KNOB NEEDS TO GET FIXED
 JUSTIFICATION: SECURITY OF PERSONAL EFFECTS
 02-168907 45

020820
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9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>Robert L Santacruz Cpl</i>
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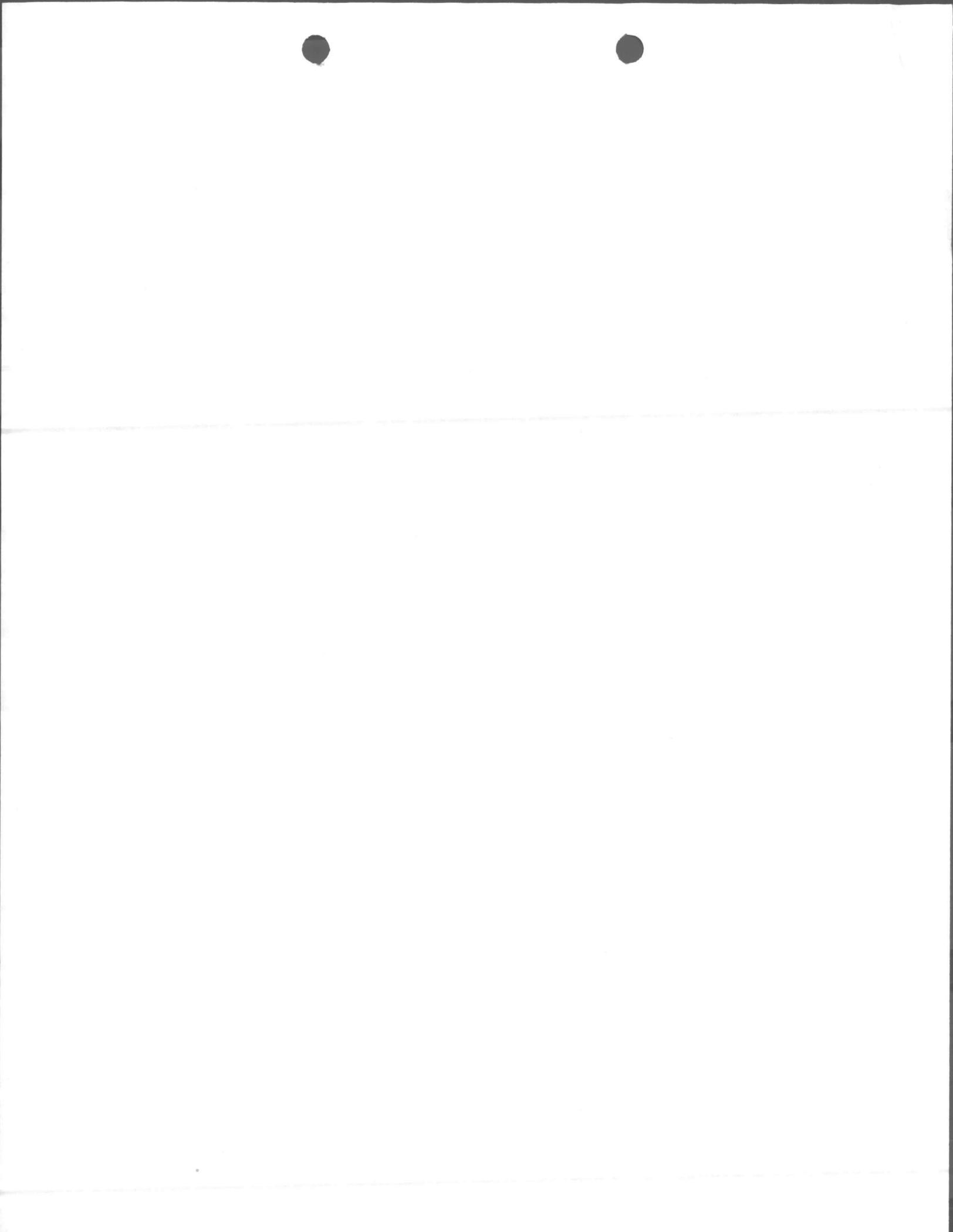
PART II--COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____ PROGRAMMING TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS <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)



WORK REQUEST (MAINTENANCE MANAGEMENT)
NAVFAC 9-11014/20 (REV. 2/94 (EF)) (New S/N number pending)

Date 08-20-02

Endorsement
From: CG, 2d FSSG, FMFLant
To: Base Main Officer
Via: (1)

PW Department see instructions in NAVFAC MO-321

Requestor see instructions on Reverse Side

Forwarded: *[Signature]*

PART I--REQUEST (Filled out by Requestor)

By direction

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION

2. REQUEST NO.
F010 02-00035

3. TO COMMANDING GENERAL, MCB
COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)

4. DATE OF REQUEST
20020820

5. REQUEST FOR COST ESTIMATE PERFORMANCE OF WORK

5a. REQUEST WORK START
ROUTINE

6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607

7. SKETCH/PLAN ATTACHED
 YES NO

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

LOCATION: HP-301 ROOM 233

020830
MSR
470

DESCRIPTION: DOOR WILL NOT LATCH, DOOR KNOB NEEDS TO GET FIXED

JUSTIFICATION: SECURITY OF PERSONAL EFFECTS

02-168908 45

9. FUNDS CHARGEABLE

10. SIGNATURE (Requesting Official)

Albert L Santacruz Cpl

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 YES NO

a. Labor

15.

APPROVED

PROGRAMMING TO START IN _____

b. Material

APPROVED

PROGRAMMING TO START IN _____

c. Overhead and/or Surcharge

PROGRAMMING TO START IN _____, IF

d. Equipment Rental/Usage

AUTHORIZED BY 25TH OF _____ AND FUNDS

e. Contingency

DISAPPROVED. (See Reverse Side)

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)

NAVCOMPT 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)



4

08/20/02
 Endorsement
 From: CG, FSSG, FMFLant PW Department see instructions in NAVFAC MO-321
 To: Base Maint Officer
 Via: (1) *[Signature]*
 Forwarded!

Requestor see instructions on Reverse

PART I--REQUEST (Filled out by Requestor)

By direction

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00033
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)	4. DATE OF REQUEST 20020820
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607	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.)

LOCATION: HP-301, ROOM 336

DESCRIPTION: THE DOOR TO ROOM 336 WILL NOT OPEN FROM THE INSIDE.

JUSTIFICATION: SAFETY

02-168909 45

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9. FUNDS CHARGEABLE

10. SIGNATURE (Requesting Official)

Robert L Santacruz Cpl

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
	15.
	<input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____ PROGRAMMING TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.
	<input type="checkbox"/> DISAPPROVED. (See Reverse Side)
	16. SIGNATURE
f. Total	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	



08/20/02

Endorsement
 From: CG, 2d ASG, FMFLant
 To: Base Maint Officer
 Via: (1) *[Signature]*
 Requestor see instructions on Reverse Side
 Forwarded! *[Signature]*
 PW Department see instructions in NAVFAC MO-321

PART I--REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00039
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S G-4 FAC. OFFICER)	4. DATE OF REQUEST 20020820
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 451-0607	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.)

LOCATION: HP-301, ROOM 224

DESCRIPTION: THE DOOR DOES NOT LATCH, DOOR KNOB NEEDS TO GET FIXED

JUSTIFICATION: SECURITY OF PERSONAL EFFECTS

02-168905 45

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9. FUNDS CHARGEABLE

10. SIGNATURE (Requesting Official)
Silvestre L. Santacruz Cpl

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

11. TO	12. ESTIMATE NO.
13. COST ESTIMATE	
a. Labor	14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
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 PROGRAMMING TO START IN _____ PROGRAMMING 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	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
22. DATE	



1952-8

1952-8

1952-8

WORK REQUEST (MAINTENANCE MANAGEMENT)
NAVFAC 9-11014/20 (REV. 2/84 (EF)) (New S/N number pending)

PW Department see instructions
in NAVFAC MO-321

Requester see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

F020

1. FROM 2nd FSSG 2nd Military Police Battalion, Bravo Company		2. REQUEST NO. HP 301-01
3. TO Camp Lejeune Base Maintenance		4. DATE OF REQUEST 20020812
5. REQUEST FOR <input checked="" type="checkbox"/> COST ESTIMATE <input type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START 20020812
6. FOR FURTHER INFORMATION CALL LCpl Torrey 451-2126		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.)

cost estimate of replacement and installation of one (1) window, sliding portion in rm 219, HP 301

Justification

- security of personal effects in room
- energy conservation

Review 02-16 Stel

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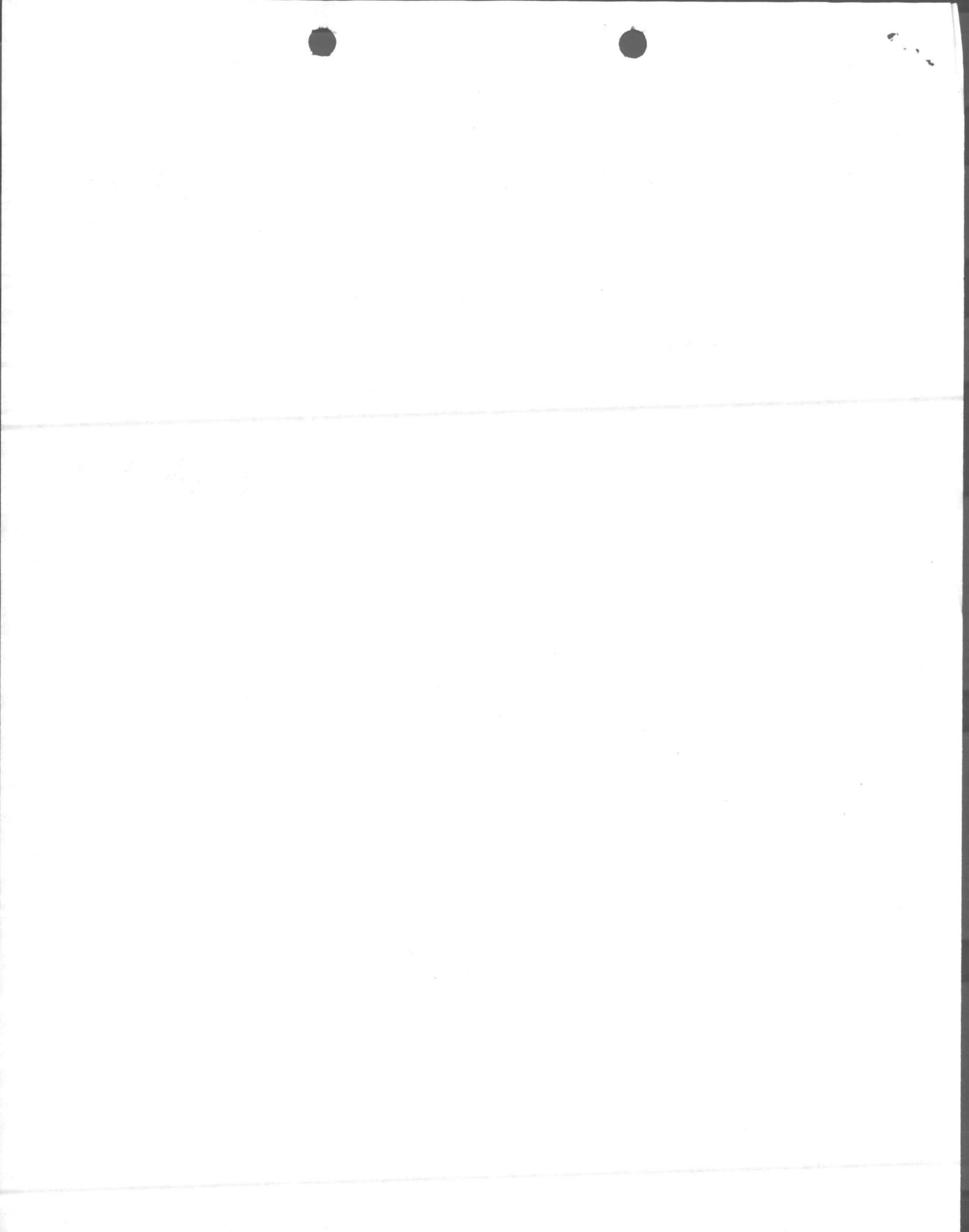
PART II---COST ESTIMATE
(Filled out by Maintenance Control Division if estimate requested)

11. TO		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor		16. <input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____ PROGRAMMING 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 Burcharge		
d. Equipment Rental/Usage		
e. Contingency		
f. Total		17. DATE
18. SIGNATURE		

PART III---ACTION (Filled out by Requestor)

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)



[Faint, illegible handwritten text]

MATERIAL RECEIVED

PRINT NAME: _____ DATE: _____

SIGNATURE: _____

COMPLETED

WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/26 (REV. 2/94 (EF)) (New S/N number pending)

07/29/02
 Endorsement
 From: CG, 2d FSSG, FMFLang
 To: Base Maint Officer
 Via: (1) [Signature]
 Forwarded [Signature]

PW Department see instructions in NAVFAC MO-321
 020729
 1601

Requestor see instructions on Reverse Side

PART I--REQUEST (Filled out by Requestor)

By direction

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00032
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S FAC. OFFICER)	4. DATE OF REQUEST 20020729
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 0646	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.)
 LOCATION: HP-301, ROOM 336 02-160200

DESCRIPTION: MISSING BASE BOARDS ALONG THE FOOT OF WALL LOCKER review

JUSTIFICATION: NEEDS TO BE REPLACED WITH ANOTHER BASE BOARD

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) C. L. Santacruz CPL SANTACRUZ
---------------------	--

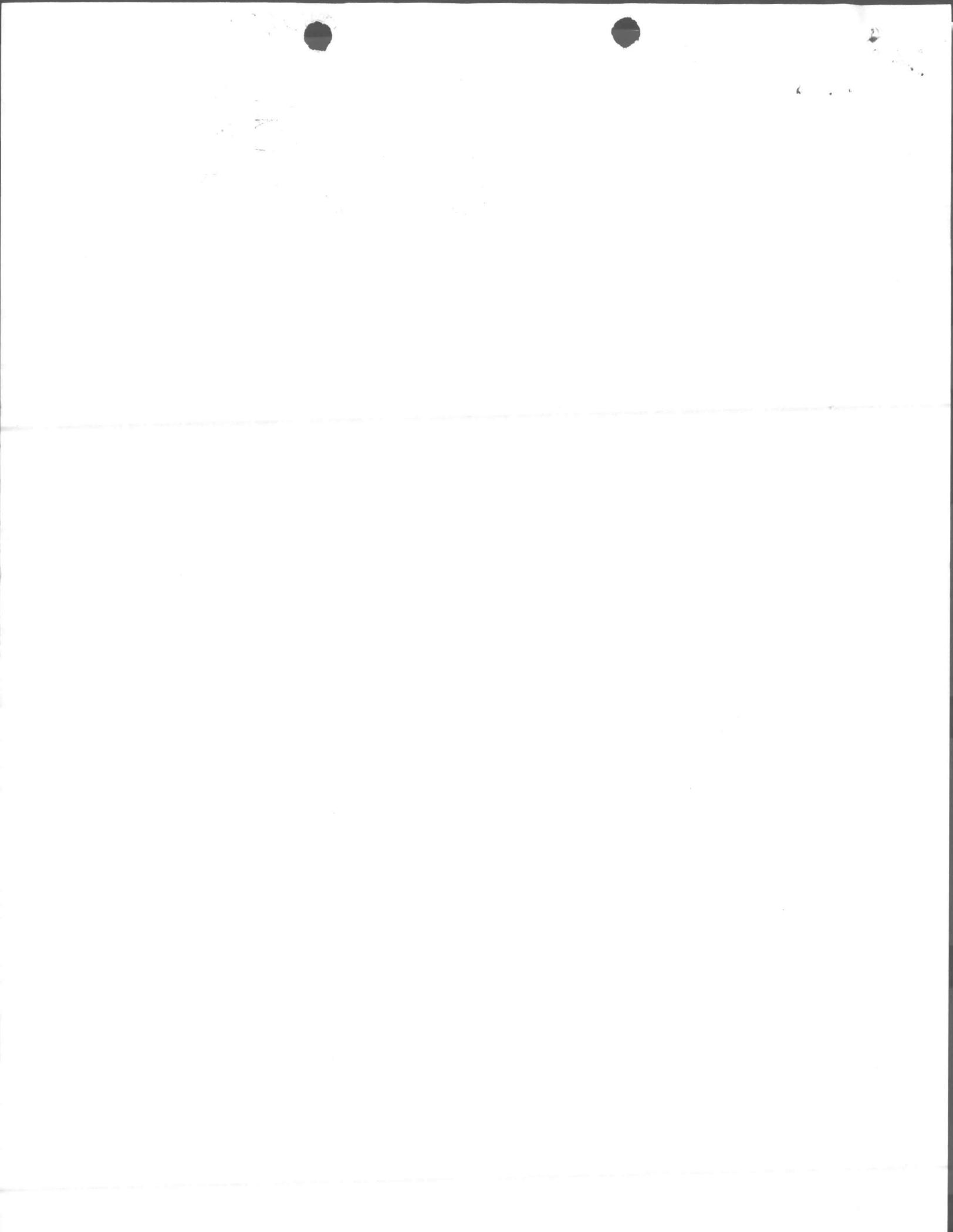
PART II--COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

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 PROGRAMMING TO START IN _____ PROGRAMMING 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)



07/29/02
 Endorsement
 From: CG, 2d FSSG, FMFLant
 To: Base Maint Officer
 Via: (Signature)
 Forwarded (Signature)
 PW Department see instructions in NAVFAC MO-321

Requestor see instructions on Reverse Side

PART I---REQUEST (Filled out by Requestor)

By direction

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00032
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S FAC. OFFICER)	4. DATE OF REQUEST 20020729
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 0646	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.)

LOCATION: HP-301, ROOM 336

DESCRIPTION: MISSING BASE BOARDS ALONG THE FOOT OF WALL LOCKER

JUSTIFICATION: NEEDS TO BE REPLACED WITH ANOTHER BASE BOARD

9. FUNDS CHARGEABLE

10. SIGNATURE (Requesting Official)

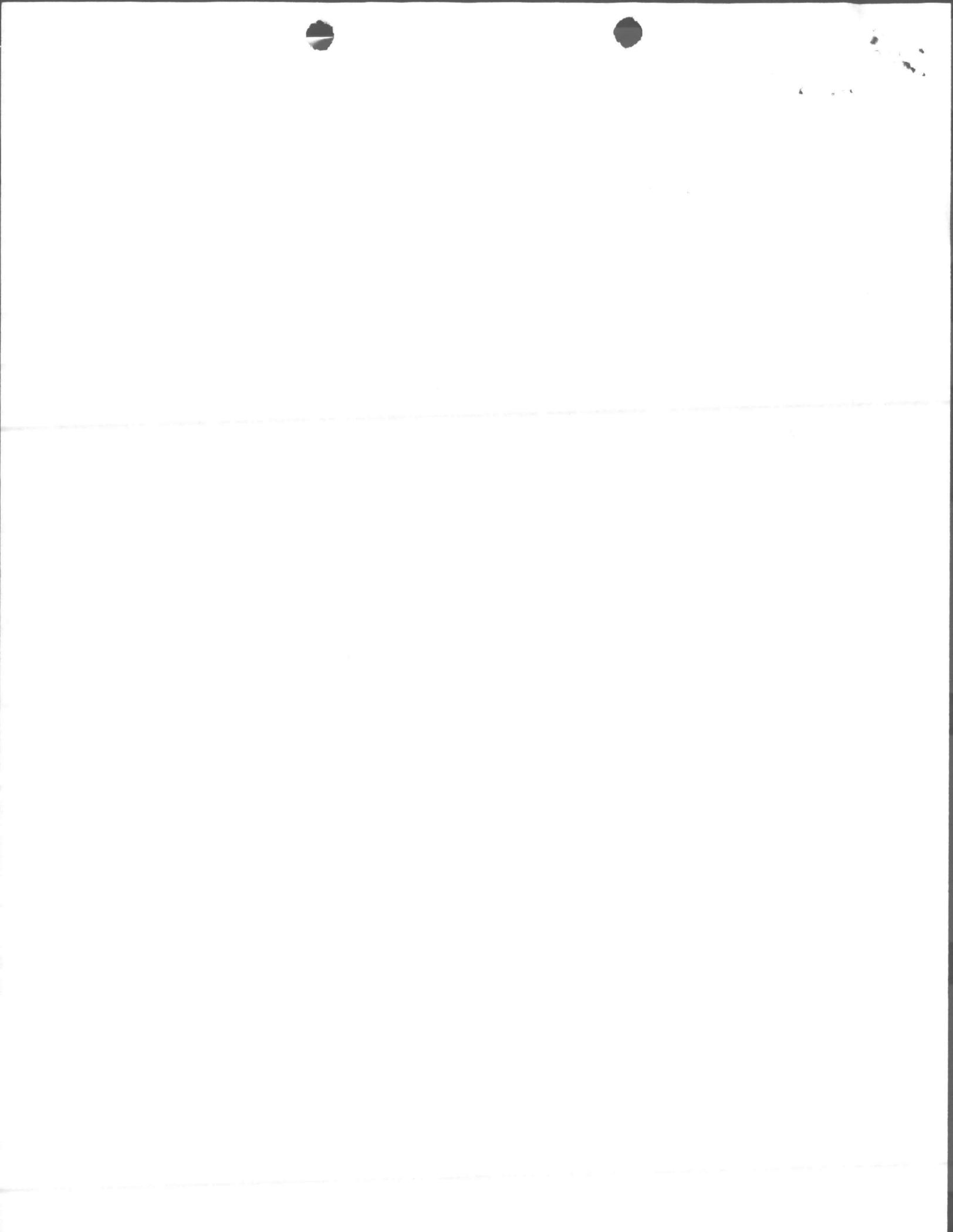
(Signature)
 CPL SANTACRUZ

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; padding: 5px;">13. COST ESTIMATE</th> </tr> <tr> <td style="width: 20%; padding: 5px;">a. Labor</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">b. Material</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">c. Overhead and/or Surcharge</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">d. Equipment Rental/Usage</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">e. Contingency</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">f. Total</td> <td style="padding: 5px;"></td> </tr> </table>	13. COST ESTIMATE		a. Labor		b. Material		c. Overhead and/or Surcharge		d. Equipment Rental/Usage		e. Contingency		f. Total		<p>14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>15.</p> <p><input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____</p> <p><input type="checkbox"/> APPROVED PROGRAMMING TO START IN _____</p> <p>PROGRAMMING TO START IN _____, IF _____</p> <p>AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE.</p> <p><input type="checkbox"/> DISAPPROVED. (See Reverse Side)</p>
13. COST ESTIMATE															
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	20. WORK REQUESTED
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved)	<input type="checkbox"/> HAS BEEN CANCELLED <input type="checkbox"/> HAS BEEN DEFERRED <input type="checkbox"/> WILL BE PERFORMED BY OTHERS
21. SIGNATURE	22. DATE
<input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	



Hancock GS09 William D

From: Hancock GS09 William D
Sent: Tuesday, July 30, 2002 2:25 PM
To: Santacruz Cpl Gilbert L
Subject: Base Boards

Cpl., We have received your work request to replace the base boards along the wall locker. This is a "Self-Help" type of request, therefore you will be required to come to Self Help and we will issue the materials needed to accomplish this task. This message has been tagged so that as soon as you read the message, we will be notified. You will have 5 working days to come and pick up the materials.

Thank you

Bill

Supervisor Shop 93

451-0074 office

451-0072 office

526-9838 cell

7/30/2002



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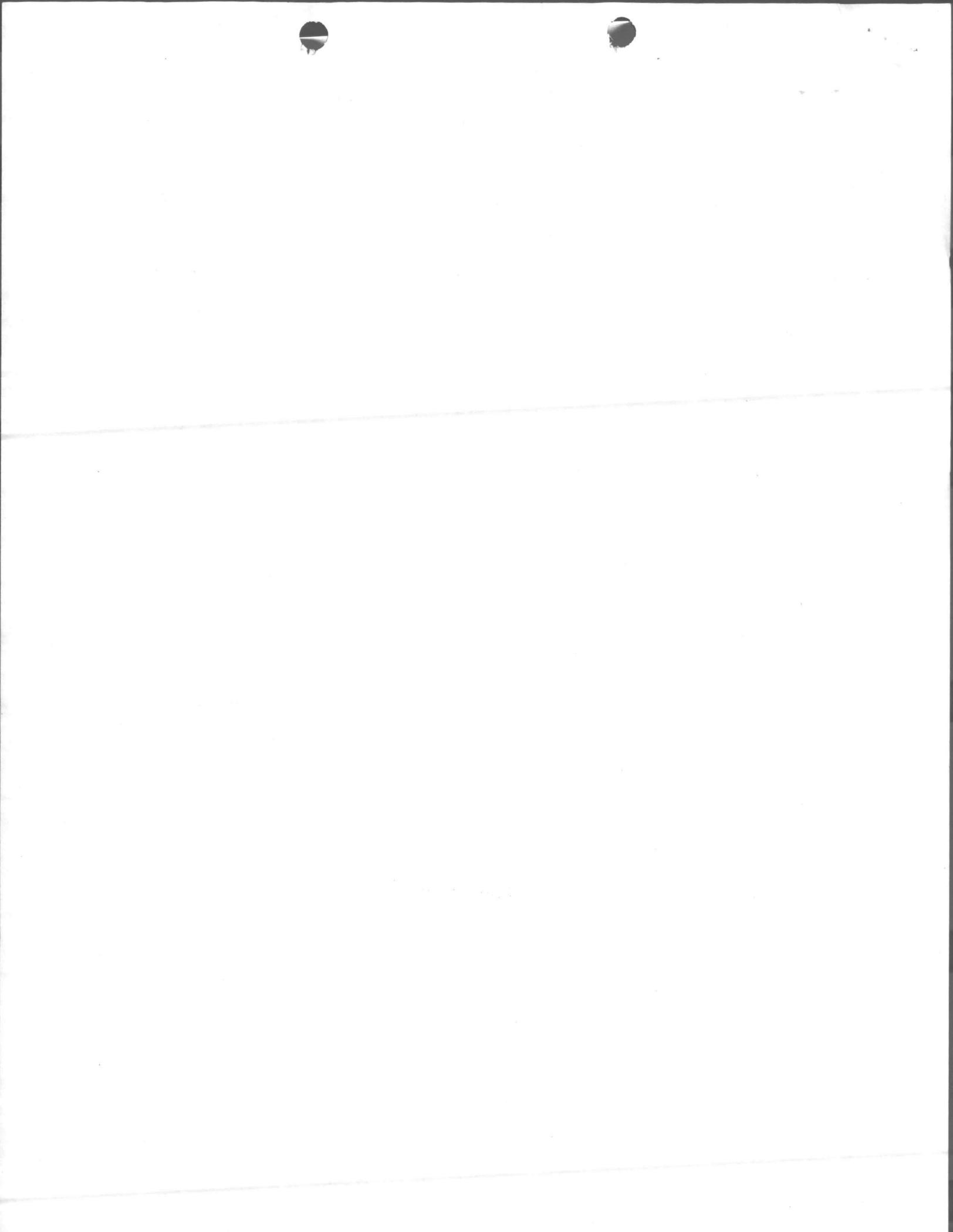
Hancock GS09 William D

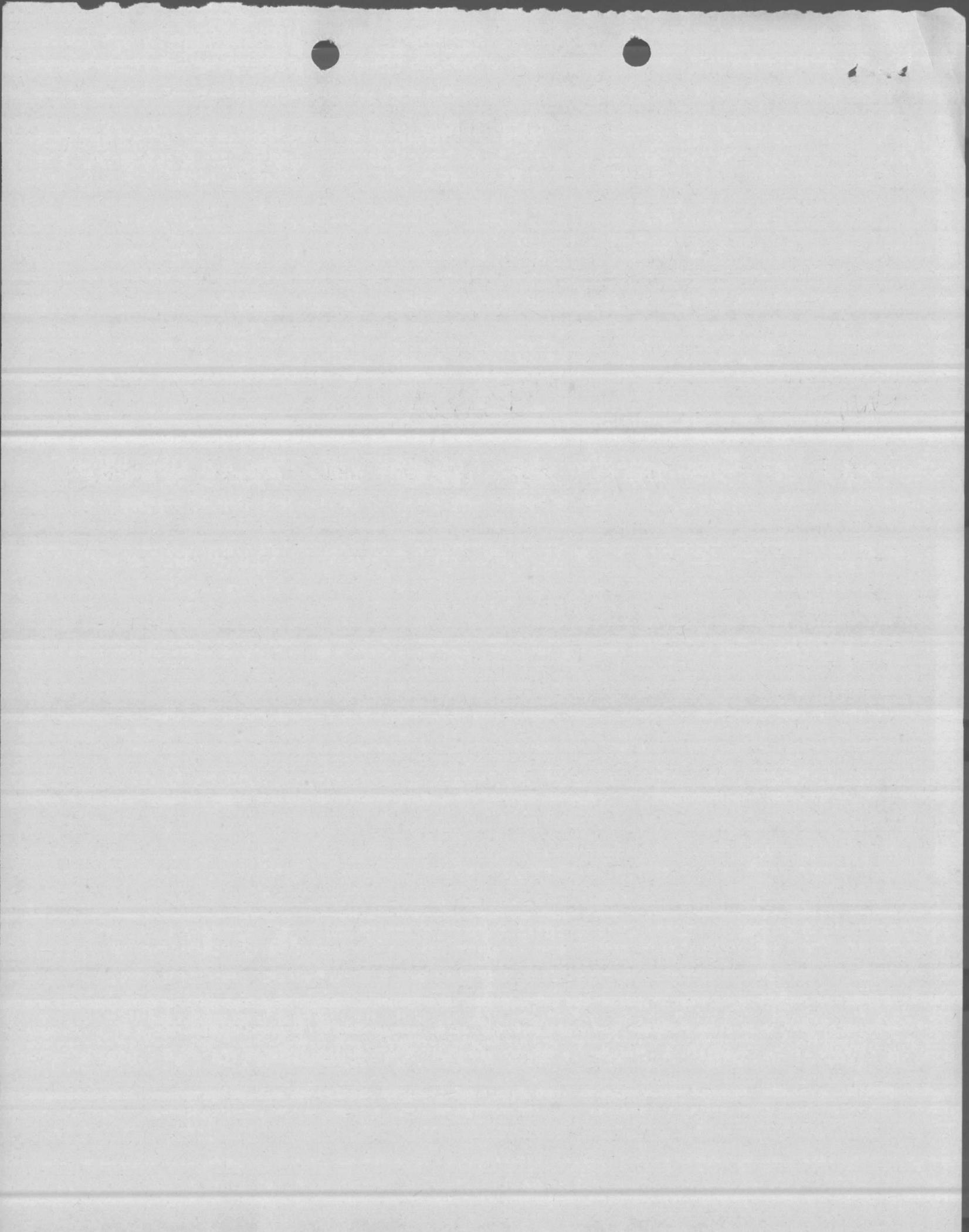
From: Santacruz Cpl Gilbert L
To: Hancock GS09 William D
Sent: Tuesday, July 30, 2002 4:03 PM
Subject: Read: Base Boards

Your message

To: Santacruz Cpl Gilbert L
Subject: Base Boards
Sent: 7/30/2002 2:25 PM

was read on 7/30/2002 4:03 PM.





Date: 07/29/02
 From: CG, 2d FSSG, FMFLant
 To: Base Maint Officer
 Via: (1) [Signature]
 Requestor see instructions on Reverse Side

020729
 1601

PART I---REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00033
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S FAC. OFFICER)	4. DATE OF REQUEST 20020729
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 0646	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.)
 LOCATION: HP-301, ROOM 318
 DESCRIPTION: REQUESTING TO REPAIR AN APPROXIMATELY 12" HOLE IN THE CEMENT WALL ABOVE THE WINDOW IN ROOM 318.
 JUSTIFICATION: SO WATER WILL NOT GET IN THE OPENING

Review

02-160201

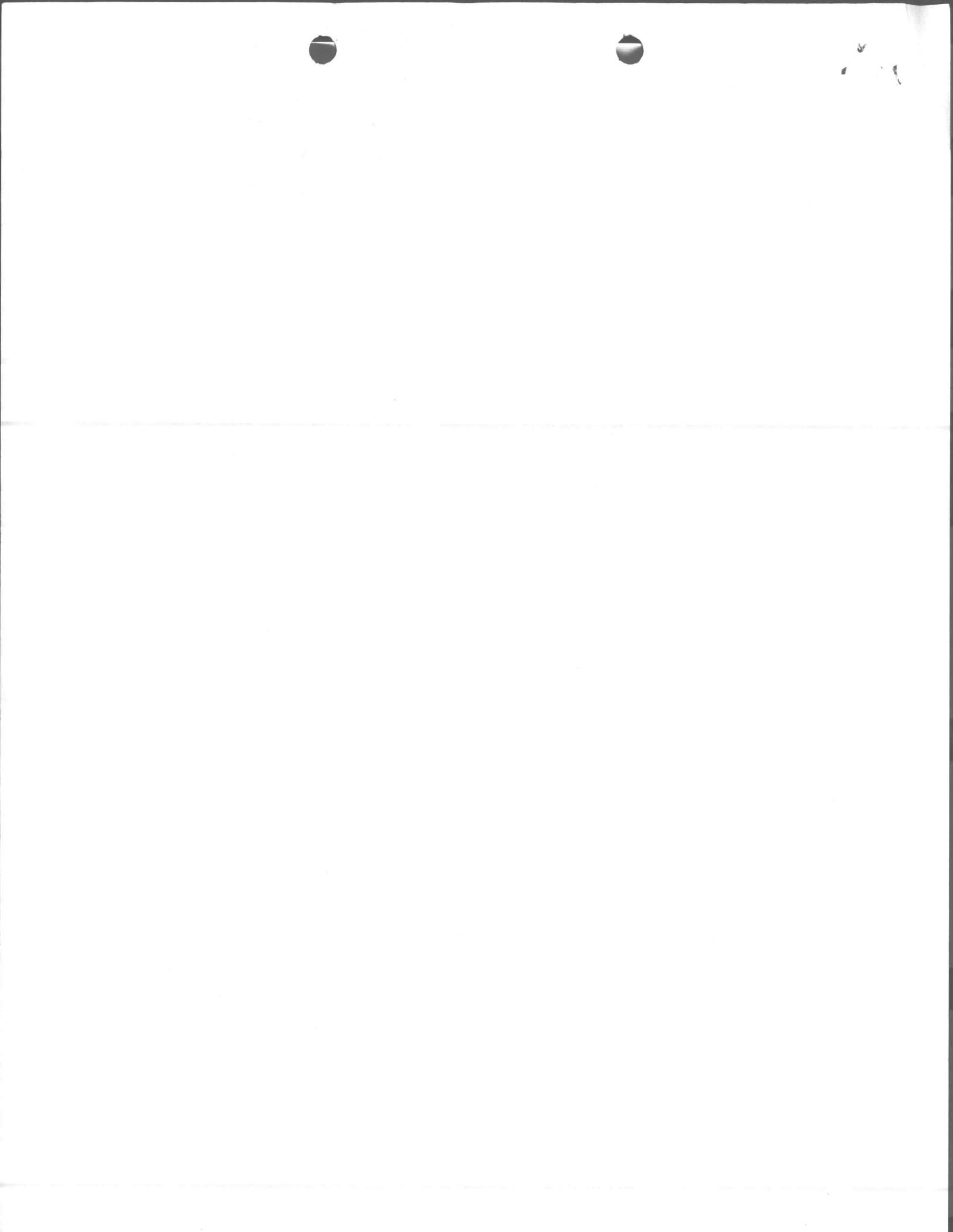
9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) [Signature] CPC SANTACRUZ
---------------------	--

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 PROGRAMMING TO START IN _____ PROGRAMMING 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	



WORK REQUEST (MAINTENANCE MANAGEMENT)
 NAVFAC 9-11014/20 (REV. 2/84 (EF)) (New S/N number pending)

0429102
 Endorsement
 From: C 2d FSSG, FMFLant
 To: Base Maint Officer
 Via: (1)
 Forwarded.

PW Department see instructions
 in NAVFAC MO-321

020729
 1601

Requestor see instructions on Reverse Side

By direction

PART I--REQUEST (Filled out by Requestor)

1. FROM COMMANDING OFFICER MILITARY POLICE BATTALION	2. REQUEST NO. F010 02-00031
3. TO COMMANDING GENERAL, MCB COMMANDING GENERAL, 2FSSG(AC/S FAC. OFFICER)	4. DATE OF REQUEST 20020729
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ROUTINE
6. FOR FURTHER INFORMATION CALL CPL SANTACRUZ 0646	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.)

LOCATION: HP-301, ROOM 312

DESCRIPTION: FRONT DOOR TO ROOM 312 IS HANGING ON BY ONE HINGE AND NEEDS TO BE FIXED

JUSTIFICATION: DOOR WILL NOT SHUT RIGHT

9. FUNDS CHARGEABLE

10. SIGNATURE (Requesting Official)

S. L. Santacruz

CPL
SANTACRUZ

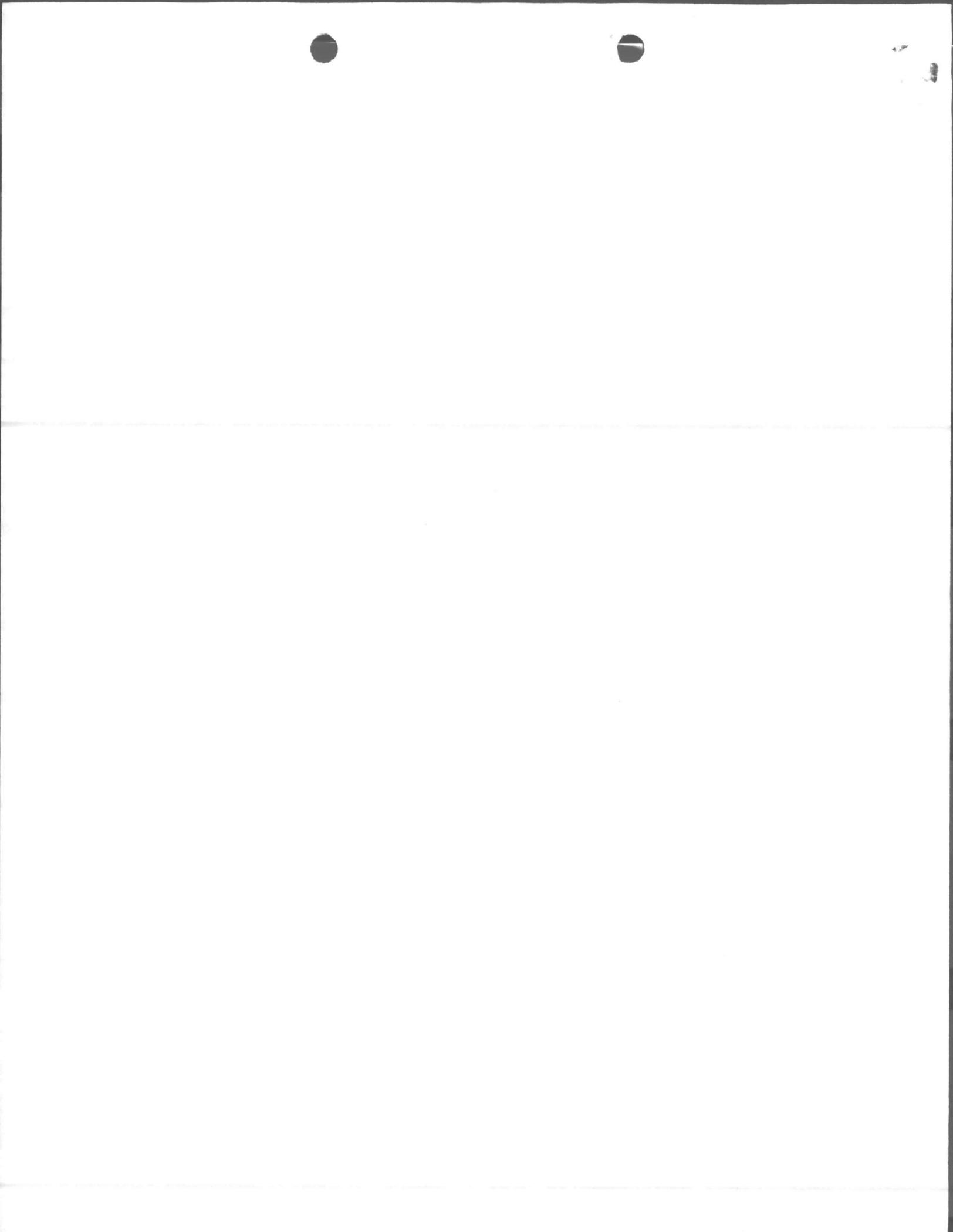
PART II--COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

11. TO	12. ESTIMATE NO.	
13. COST ESTIMATE		
a. Labor	14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
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 PROGRAMMING TO START IN _____ PROGRAMMING 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)



TAB PLACEMENT HERE

DESCRIPTION:

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TAB PLACEMENT HERE

DESCRIPTION:

J.O. Pending

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BASE MAINTENANCE JOB ORDER

FY 00	AG/SAG	REQ. CODE B048	REQUEST #	DIST. DATE - BY 5/7/02	FACILITY # HP301			
AAC M67001	FA 23	WC	FC OC/SOC 25B8	CAC EBG0	BRC	JN/LU EBG0	RON	RBC
WGC 5	TYPE OF WORK M1	PROJECT #	SKETCH NO	PLAN	PRIME VENDOR CAMBAR			

FOR FURTHER INFORMATION CONTACT: N. WIGGINS PH 451-0870

GENERAL JOB DESCRIPTION: PURCHASE COMPRESSOR FOR SHOP 53

PURCHASE COMPRESSOR FOR CHILLER WILL BE INSTALLED ON TIC 02-131976

Hot!

START DATE: 13 May 02 COMPLETE BY: _____ COMPLETION DATE: _____

PHASE SEQUENCE		SUMMARY OF ESTIMATES						
PHASE NO.	WORK CTR	EST HRS	SHEET NO.	WORK CTR	LABOR COST	MATERIAL COST	OVERHEAD & PROFIT	TOTAL COST
1	53			53 20		5696.00	655.04	6351.04
TOTALS						5696	655.04	\$6,351.04

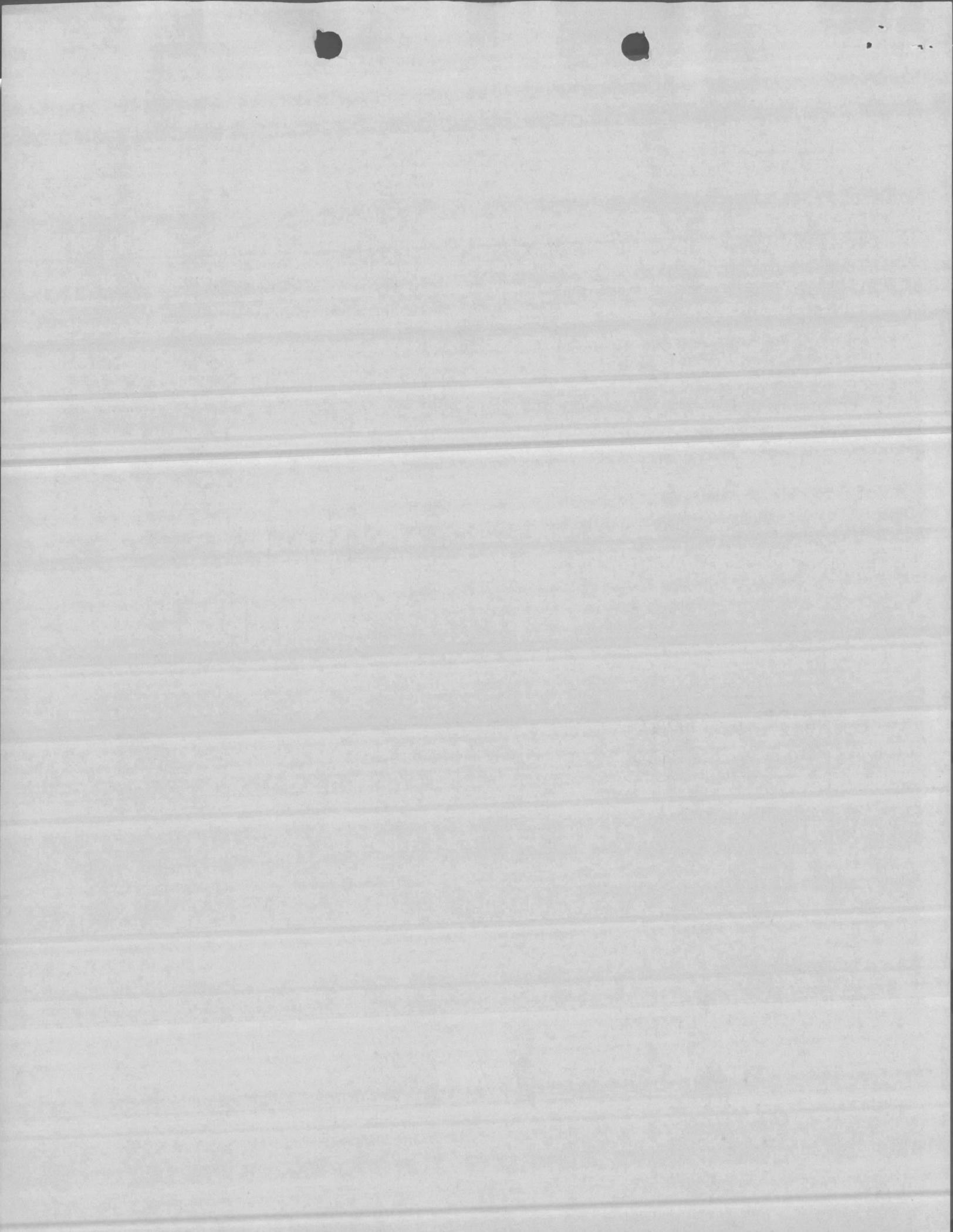
CONTINUED ON SH_0_ THRU_0_

PREPARED BY: NCW DATE: 5-2-02 TICKET # 02-131981

REVIEWED BY: ncw

AUTHORIZED BY: [Signature] DATE: 5/7/02

SHEET 1 OF 3



SCOPE OF WORK

SOURCE OF SUPPLY C.C. DICKSON CO
JACKSONVILLE NC
PH 455-4996

DETAILED JOB DESCRIPTION

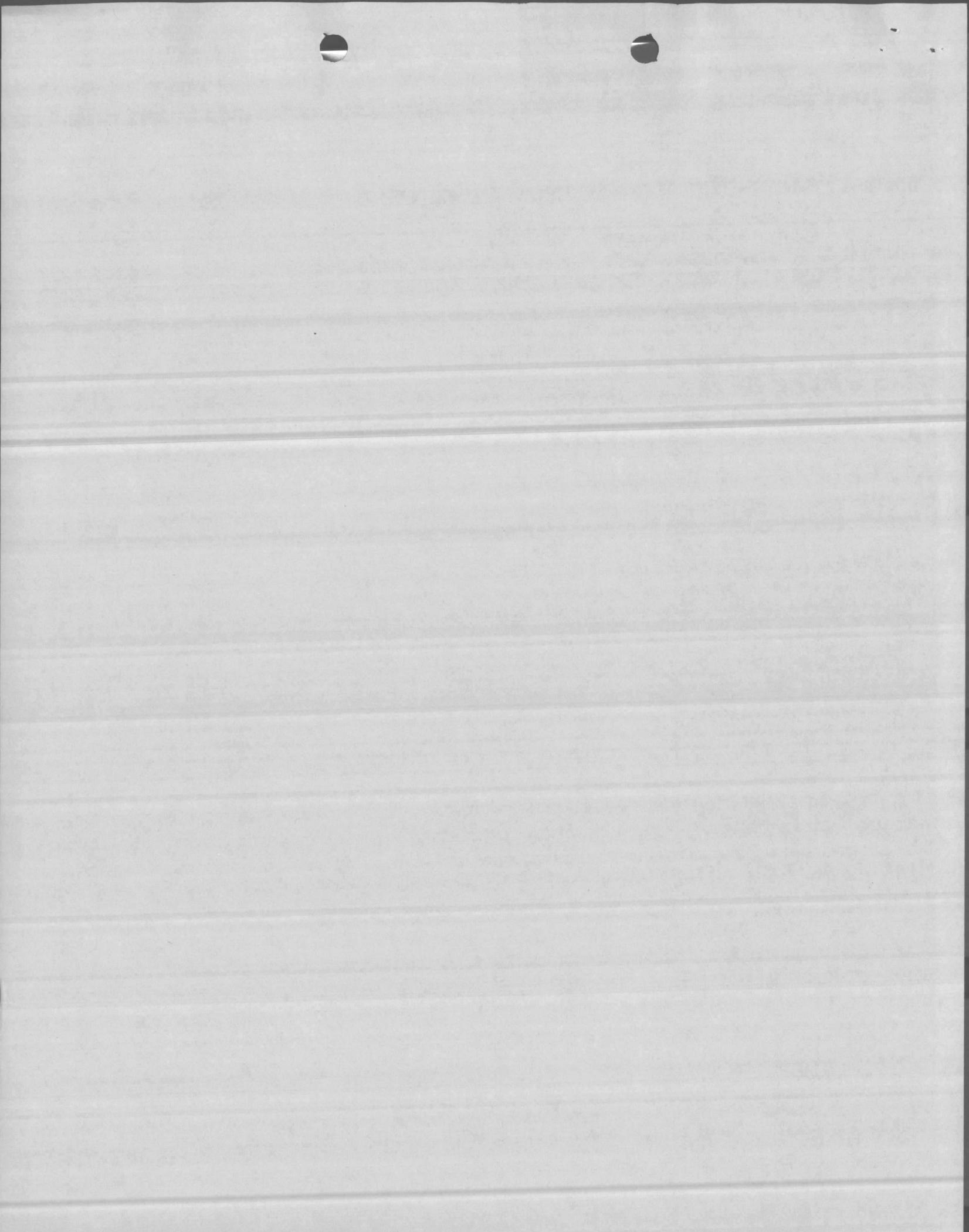
COMPRESSOR, YORK MODEL ZB6W1-E17S
208 VOLTS, 3 PHASE, 60 CY.
TO BE REMANUFACTURED AND HAVE ONE YEAR WARRENTY
TO BE EXCHANGED

REQUEST #

REQUEST #

TICKET # 02-131981

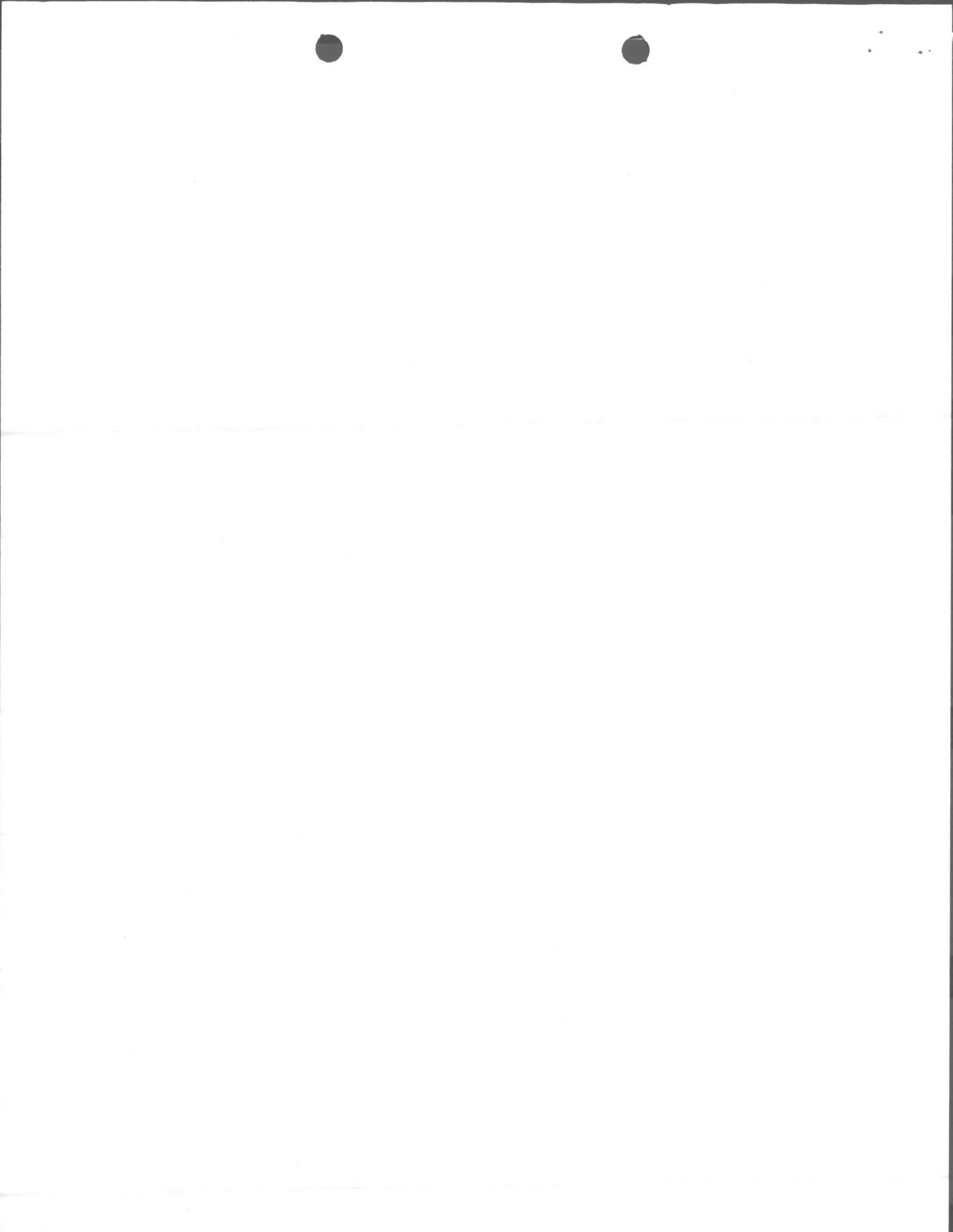
SHEET 2 OF 2



BILL OF MATERIALS

DATE	TICKET #	UNIT	BLDG #	NATURE OF WORK	WORK CTR
5-2-02	02-131981	B048	HP301	PURCHASE COMPRESSOR	53
QTY	U/A	SIZE	MATERIAL REQUIRED	UNIT COST	TOTAL COST
1	EA	65HP	COMPRESSOR, YORK MODEL ZB6W1-E17S 208 VOLTS, 3PHASE, 60 CY. TO BE REMANUFACTURED AND HAVE ONE YEAR WARRENTY. TO BE EXCHANGED S.S. C.C. DICKSON CO PH 455-4996 ATTN JOHN	5,696.00	5,696.00
TOTAL MATERIAL COST THIS SHEET					5,696.00
TOTAL MATERIAL COST THIS SHEET AND ALL SHEETS					5,696.00

523



BASE MAINTENANCE DEPARTMENT
MARINE CORPS BASE
CAMP LEJEUNE, NORTH CAROLINA 28542

COMPRESSOR REQUISITION

DATE: 15-9-02 SHOP EMPLOYEE: DONALD GAUVIN

PHONE: 451-3235 BLDG. # HP-301

UNIT MAKE: YORK UNIT MODEL: YCA288 EES-17 PA

UNIT SERIAL NO. RDF 22 2285 AA

COMPRESSOR MAKE: YORK COMPRESSOR MODEL: ZB6W1-E17S

COMPRESSOR SERIAL NO.: GBFR 241240 65 HP

TANDEM: _____

VOLTAGE: 200 PH: 3 HZ: _____ RUNNING AMPS: _____

CONTROL VOLTAGE: 120 NO OF TERMINALS: 6 CONTROL SAFETY MODULE POWER: _____

REFRIGERANT CONNECTIONS: SWEAT: ROTO LOK: VALVE:

UNLOADERS: ELECTRIC: HYD: INTERNAL: EXT: NONE:

UNLOADERS: LOCATION: _____ NUMBER: 2 REFRIGERANT: 22

REASON FOR REPLACEMENT: GROUNDED: SHORTED: BROKEN VALVES:

DRIERS NEEDED LIQUID LINE: SIZE: _____ TYPE: _____ QTY: _____

DRIERS NEEDED SUCTION LINE: SIZE: _____ TYPE: _____ QTY: _____

CONTACTORS NEEDED (TYPE): _____

AMPS: _____ VOLTAGE: _____

SHOP #74 YES NO

7259.00
5696.00

DESCRIPTION: P/N 365-25387-012 LRA=1072

NOTE: MUST HAVE ONE-YEAR WARRENTY, MUST BE RE-MANUFACTURED, AND MUST BE U/L CERTIFIED.

AAC	FA	FC	OC/SOC	CAC	BRC	JON	RON	RBC
M670001	23	RP	2607					

SHOP SUPERVISOR'S SIGNATURE: [Signature]

\$5556.20
\$1200.00

OfficeJet R Series
Professional Printer/Fax/Copier/Scanner

Last Fax

Date	Time	Identification	Duration	Pages	Type	Result
05-01-02	08:03A	1 910 989 0802	00:46	1	Received	OK

BASE MAINTENANCE JOB ORDER

0219

FY 01	AG/SAG	REQ. CODE		REQUEST # PM # 020B-01		DIST. DATE - BY 9/18/01		FACILITY # HP-301 C	
AAC M67001	FA 23	WC	FC	OC/SOC	CAC	BRC	JN/LU EBGO	RON	RBC
WGC	TYPE OF WORK REPAIR		PROJECT #		SKETCH	PLAN	SPECIAL INSTRUCTIONS CYCLIC MAINTENANCE		

FOR FURTHER INFORMATION CONTACT: JOHN YANKOSKY 451-0877 TICKET # 01-71226

GENERAL JOB DESCRIPTION: MISC. STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS

FOR ENTRY INTO BUILDING CONTACT: MYSGT SMITH 451-3396

START DATE: 10/29/01 NEED MATERIAL BY: 11/1/2001

START DATE: 12-01-01 COMPLETE BY: COMPLETION DATE: 12-7-01

PHASE SEQUENCE SUMMARY OF ESTIMATES

PHASE NO.	WORK CTR	EST HRS	SHEET NO.	WORK CTR	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
1	41 CG MECHAN	32		41CG MECHAN	32	\$ 941		\$ 941
2	41CG ELEC	32		41CG ELEC	32	\$ 941		\$ 941
3	41CG STRUCT	32		41CG STRUCT	32	\$ 941		\$ 941
							\$ 1,055	\$ 1,055
TOTALS					96	2823	1055	\$ 3,878

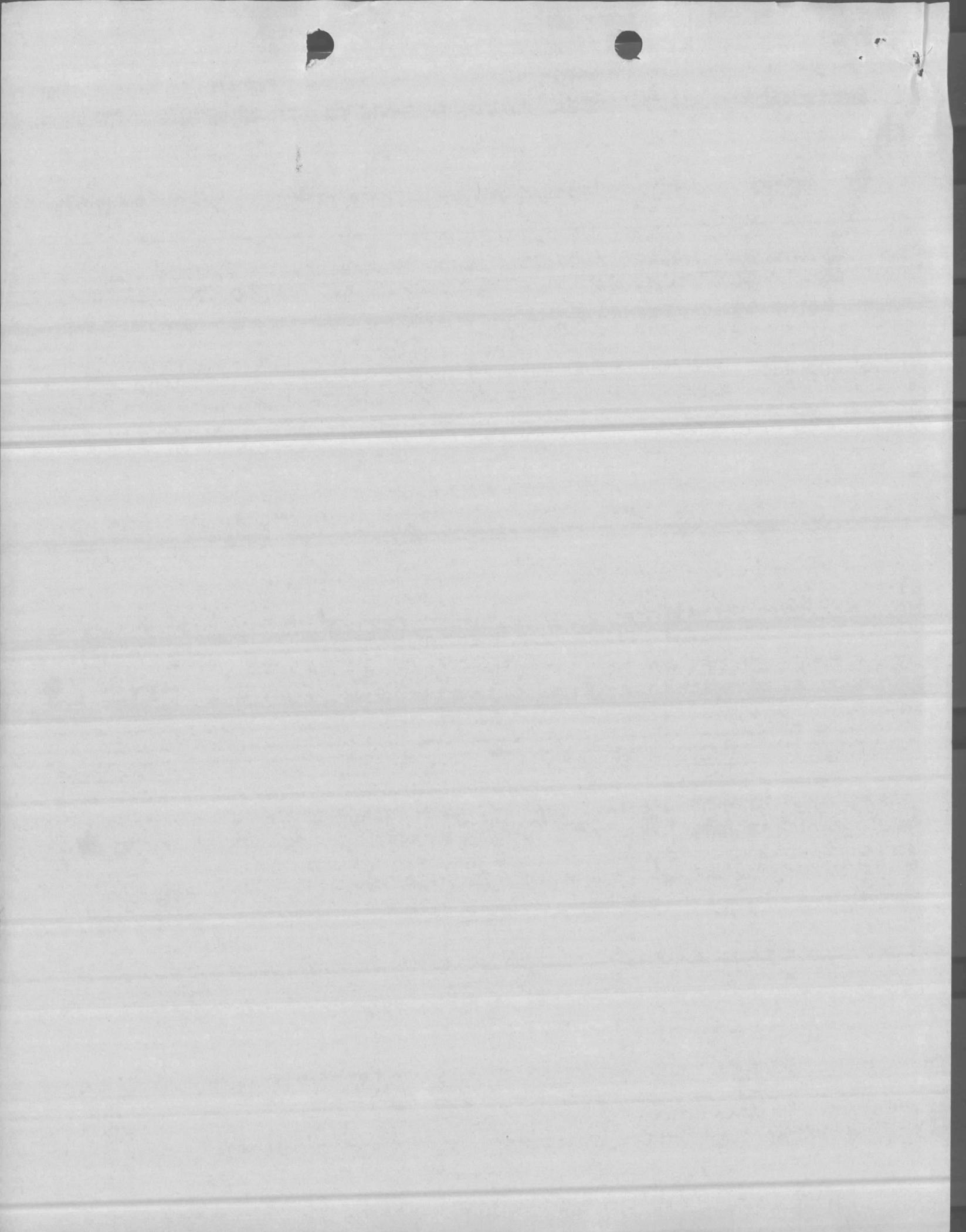
CONTINUED ON SH_0_ THRU_0_

PREPARED BY: JOHN YANKOSKY DATE: 09/11/01

REVIEWED BY: *Dave Brown*

AUTHORIZED BY: *Emilia* DATE: 9/13/01

SHEET 1 OF 35



*** PHASE DESCRIPTIONS ***

JOB/IFS	WORK CENTER	CRAFT NAME	BLDG/ FACILITY	EST HOURS
1	1/1 41CG	COMPANY CONCEPT CARPENTER	HP-301	0
MISC STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS.				

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

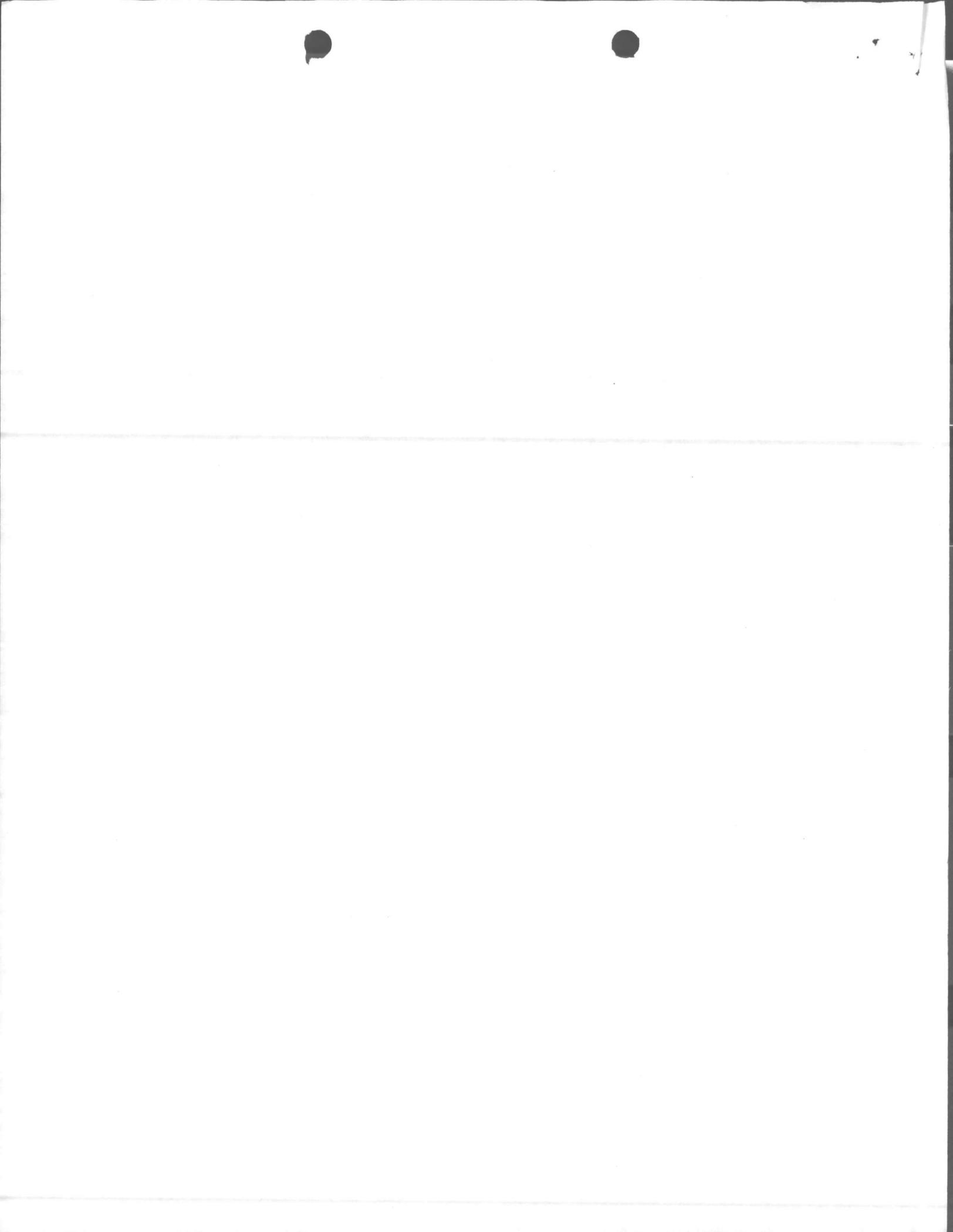
*** THE LAST PHASE HAS BEEN PRINTED ***

*2841 labor
1055*

*01-71226
71226*

*44567 54174
3990
38 sheet
PH 7020 B-01*

(2)



EPS JOB: HP 301

DATE: 01/03/20

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

PAGE: 1

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

(1)

MCN-NSN: 4510-00-202-73660 UNIT OF ISSUE: EA SOURCE OF SUPPLY:
QUANTITY: 3 UNIT COST: 3.00 TOTAL COST: 9.00
LOCATION:
DESCRIPTION: LEVER ASS'Y, WAT/CLO

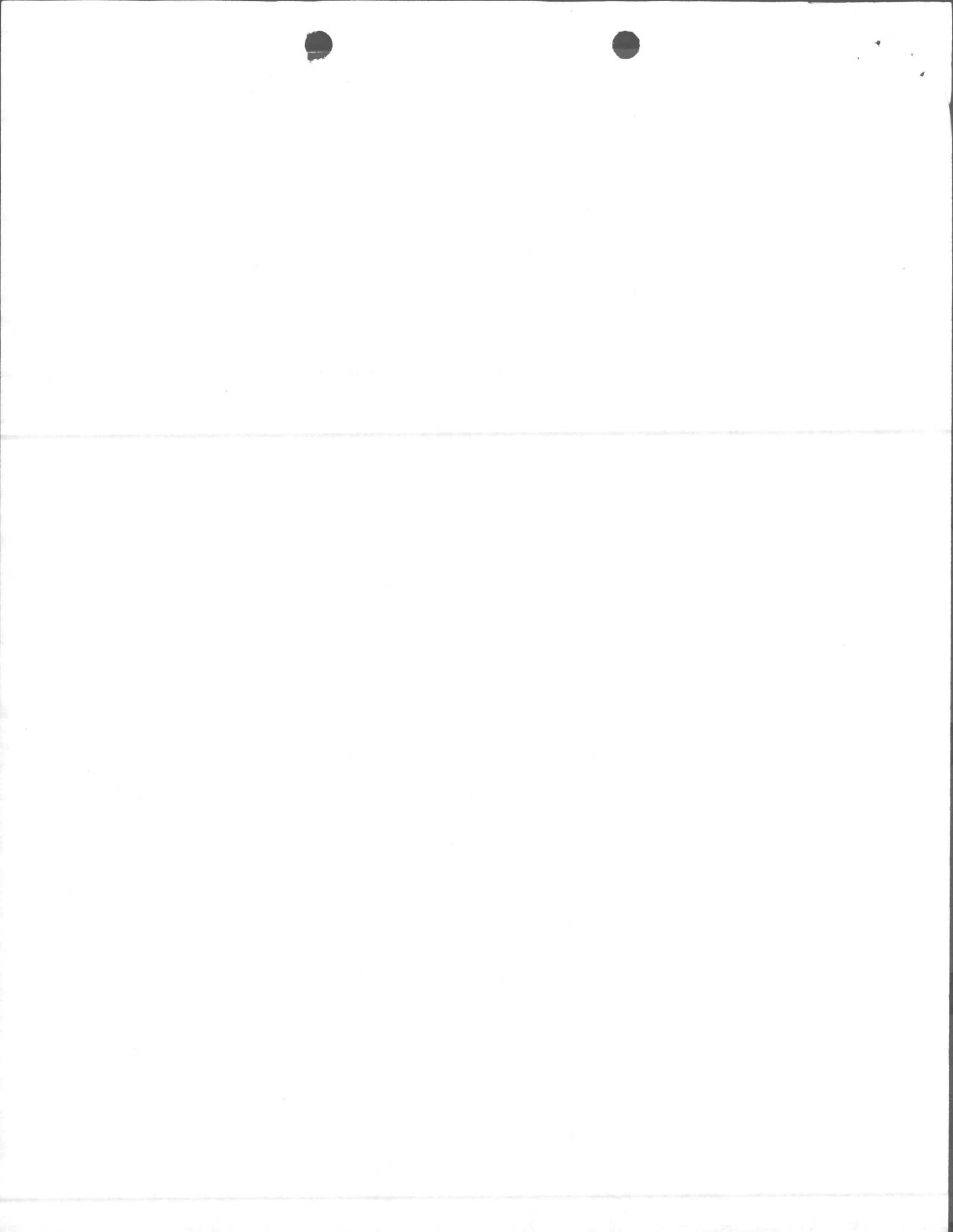
SOS TOTAL COST: \$9.00

*** CONTINUED ON PAGE 2 ***

6
207

(3)

(S)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

②

MCN-NSN: 6350-01-C00-17740	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: LD
QUANTITY: 5	UNIT COST: 9.75	TOTAL COST: 48.75
LOCATION:		

DESCRIPTION: SMOKE DETECTOR, 9V BATTERY BACKUP, BAT. INCLUDED
NOW CARRIED IN WARE HOUSE. SAME AS 4210-86-RAC-BATT
S/S IF WAREHOUSE IS OUT IS MADDUX 1-800-849-5506, LISA
MADDUX PART # 86 RAC.

*
*
*

SOS TOTAL COST: \$48.75

*** CONTINUED ON PAGE 3 ***

01-71235
01-71226

②



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

3

MCN-NSN: 5340-3J-944-VIEWO UNIT OF ISSUE: EA SOURCE OF SUPPLY: BPA
QUANTITY: 5 UNIT COST: 3.89 TOTAL COST: 19.45
LOCATION:
DESCRIPTION: VIEWER, DOOR, WIDE ANGLE, GRAINGER P/N 3J944
S/S GRAINGER
505 COVIL AVE.
WILMINGTON, NC.
1-910-762-3088
.
.
.

4

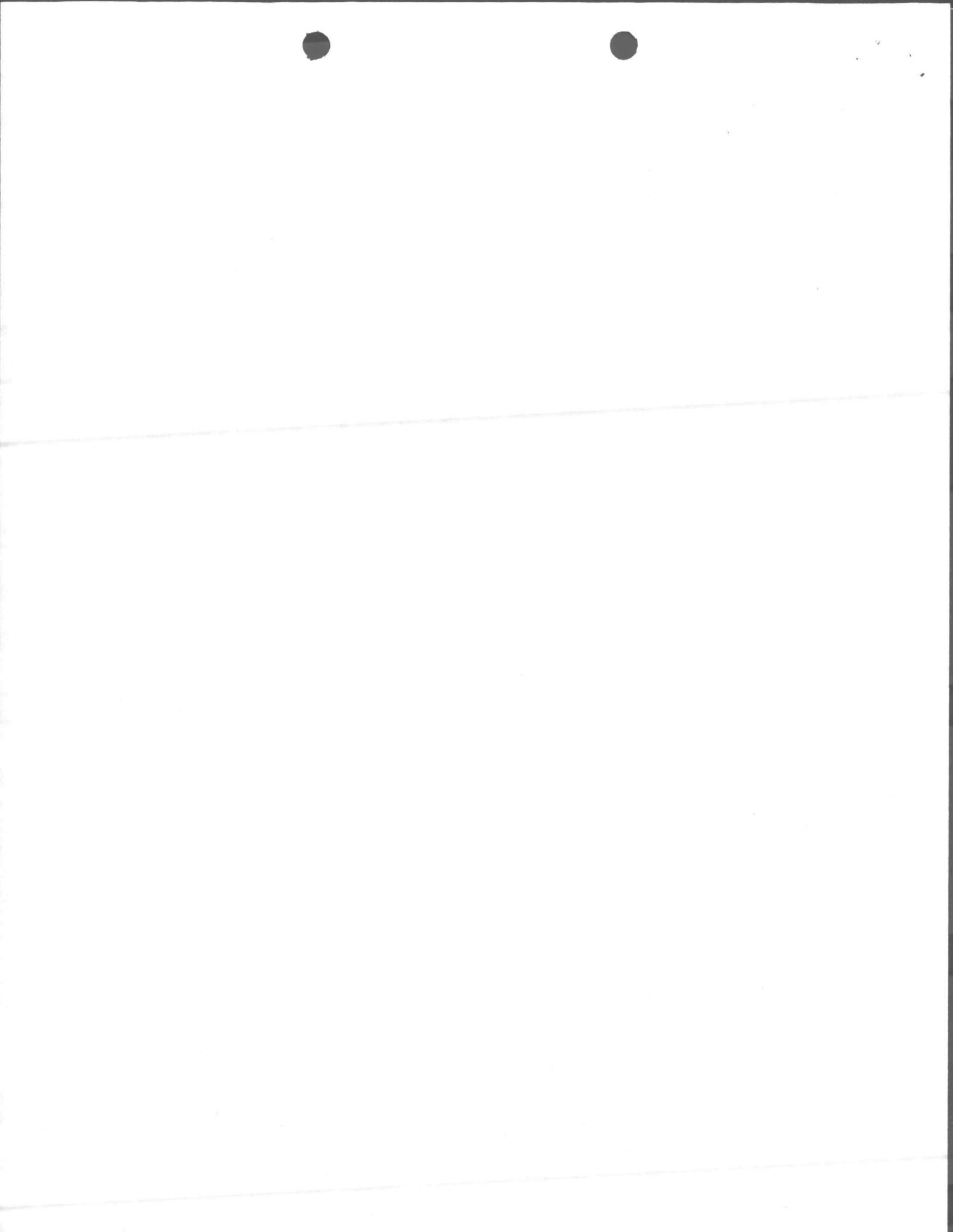
MCN-NSN: 6210-RB-792-RLM00 UNIT OF ISSUE: EA SOURCE OF SUPPLY: BPA
QUANTITY: 2 UNIT COST: 32.00 TOTAL COST: 64.00
LOCATION:
DESCRIPTION: LENS, P/N RB 79-2
S/S CRAVEN ELECTRIC
JACKSONVILLE, NC.
353-4643
MAKE SURE END CAPS ARE CLEAR PLASTIC.
WE RECEIVED SOME WITH WHITE PLASTIC END CAPS
AND THEY ARE ABOUT 1/8" TO LONG
OVERALL LENGTH 25 9/16"
.
.
.

SOS TOTAL COST: \$83.45

*** CONTINUED ON PAGE 4 ***

01-71226

5



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

⑤

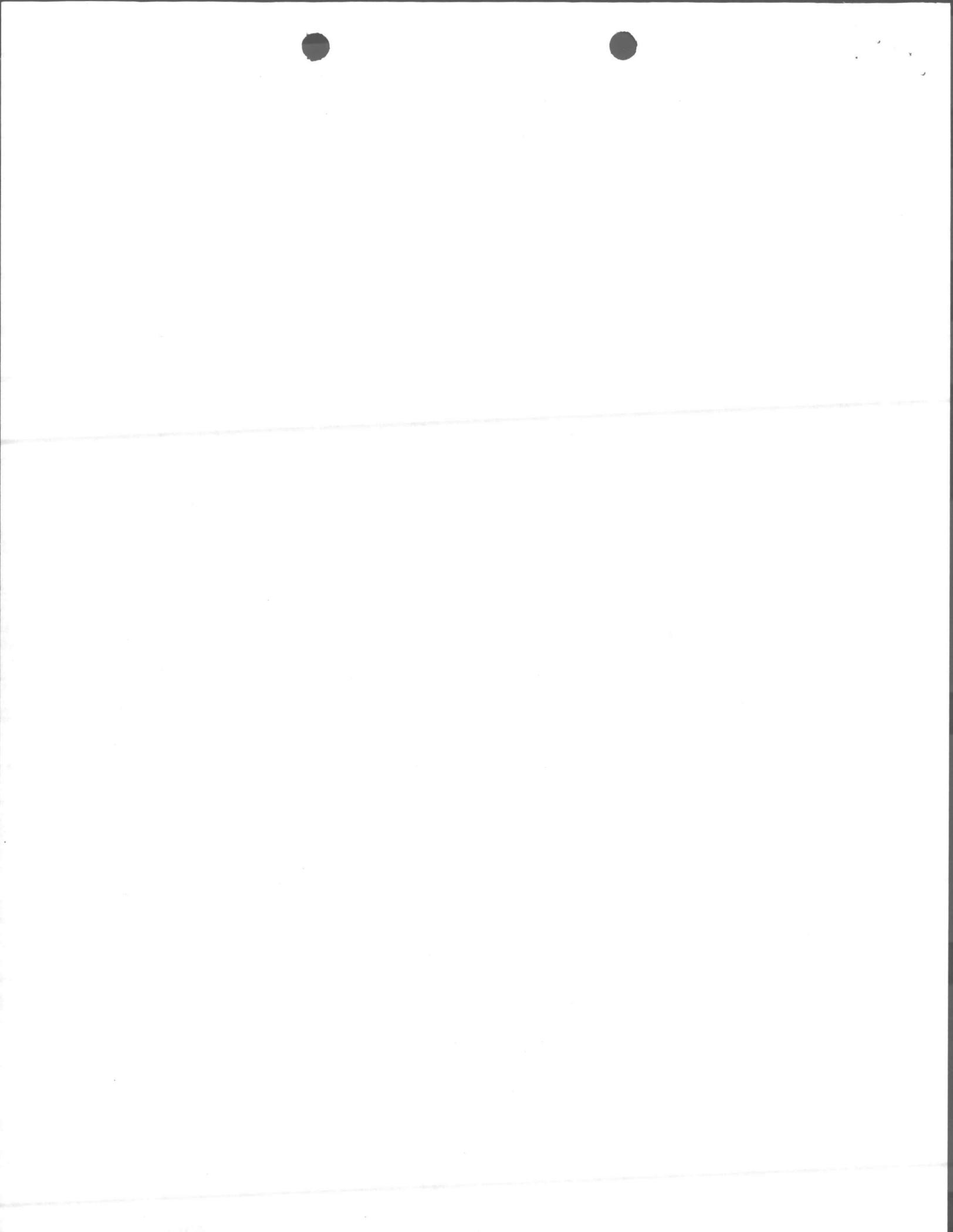
MCN-NSN: 6210-CR-AVF-21050	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: CR
QUANTITY: 1	UNIT COST: 34.00	TOTAL COST: 34.00
LOCATION:		

DESCRIPTION: LENS COVER, FLUOR. 4 FT.
CRAVEN PART# F-2105
S/S CRAVEN ELECTRIC, JACKSONVILLE, N.C.
353-4643
USED FOR OFFICE SPACES IN HP-51,53& HP 185PASSAGEWAY
.
.
.

SOS TOTAL COST: \$34.00

*** CONTINUED ON PAGE 5 ***

①



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

6

MCN-NSN: 6210-02-FVS-00480	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: CRA
QUANTITY: 1	UNIT COST: 45.40	TOTAL COST: 45.40
LOCATION:		

DESCRIPTION: LENS, 4 FT. VAPOR,
CRAVEN PART# TLM FVS48
ORDERED FOR M-309
S/S CRAVEN ELECTRIC
PH # 353-4643

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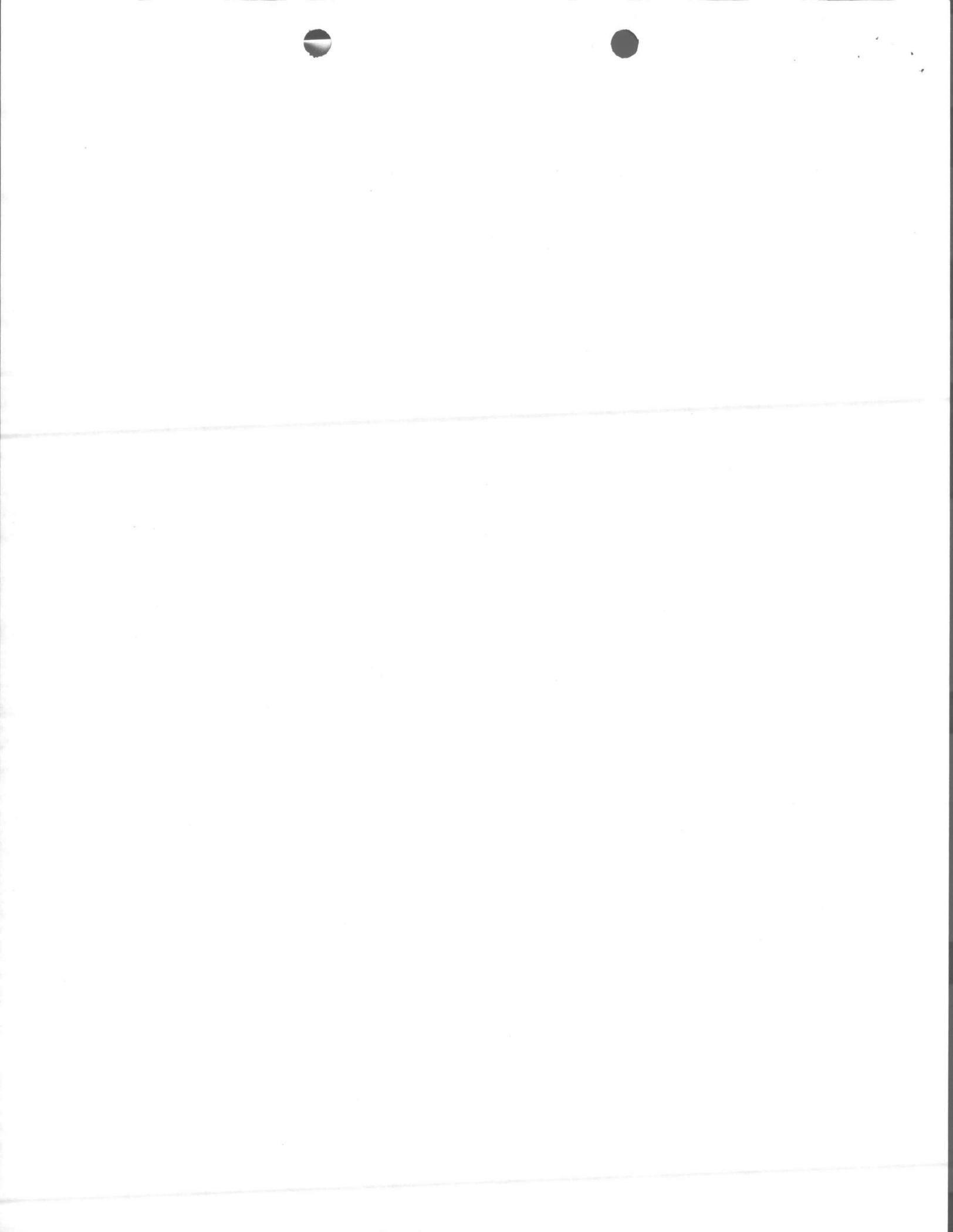
SOS TOTAL COST: \$45.40

*** CONTINUED ON PAGE 6 ***

50
5235

7

6



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

7

MCN-NSN: 4510-00-116-31520 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 3 UNIT COST: 1.98 TOTAL COST: 5.94
LOCATION:
DESCRIPTION: FLUSH CONTROL UNIT, FLAPPER BALL W/CHAIN, RUBBER MATERIAL,
DO NOT SUB. P/N 54BP (KORKY) LAVELLE IND.

8

MCN-NSN: 4510-00-202-68600 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 2 UNIT COST: 8.95 TOTAL COST: 17.90
LOCATION:
DESCRIPTION: SEAT, TOILET WITH COVER FOR FC-530
S/S WAREHOUSE

9

MCN-NSN: 4510-00-484-74100 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 20 UNIT COST: 4.64 TOTAL COST: 92.80
LOCATION:
DESCRIPTION: BAR, TOWEL, 18" LONG X 7/8" SQUARE.

10

MCN-NSN: 4510-01-200-65030 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 20 UNIT COST: 1.69 TOTAL COST: 33.80
LOCATION:
DESCRIPTION: HOLDER, TOILET TISSUE ROLLED, SPRING LOADED, TO FIT BETWEEN
2 FIXED POINTS. ROLLER

11

MCN-NSN: 4510-01-000-06710 UNIT OF ISSUE: PR SOURCE OF SUPPLY: LOC
QUANTITY: 5 UNIT COST: 4.90 TOTAL COST: 24.50
LOCATION:
DESCRIPTION: HOLDER, TOILET TISSUE, CHROME, P/N 632 SEACHROME.

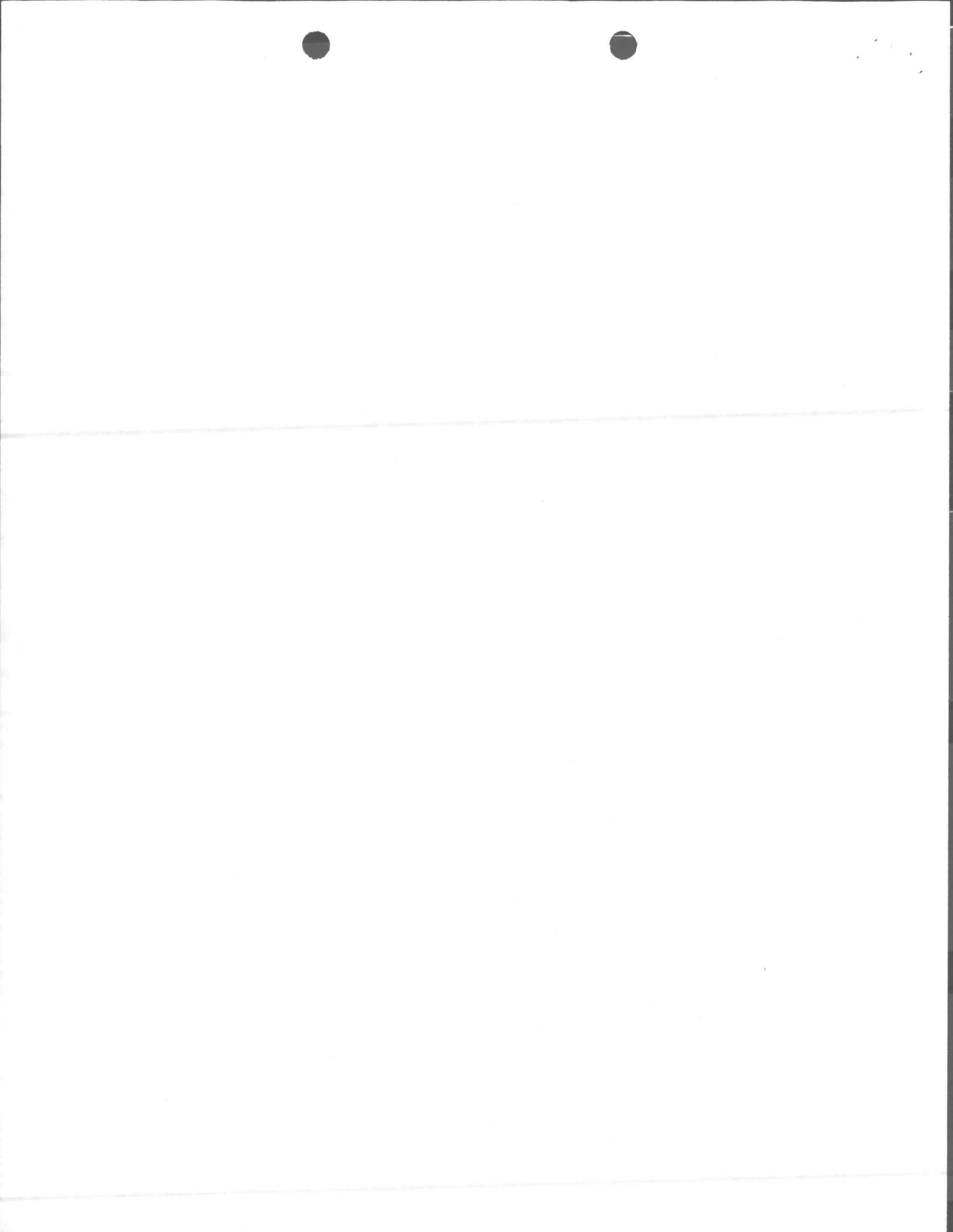
*** CONTINUED ON PAGE 7 ***

42
207

12

6 210

6



DATE: 01/03/20

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

PAGE: 7

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

12

MCN-NSN: 5935-01-012-30800 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 20 UNIT COST: 1.87 TOTAL COST: 37.40
LOCATION:
DESCRIPTION: RECEPTACLE, DUPLEX.

13

MCN-NSN: 5975-00-682-05590 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 20 UNIT COST: .59 TOTAL COST: 11.80
LOCATION:
DESCRIPTION: PLATE, WALL, ELEC, 1 GANG, OUTLET TYPE, STAINLESS
STEEL, SATIN FINISH, P/N 97101 (BRYANT)

SOS TOTAL COST: \$224.14

*** CONTINUED ON PAGE 8 ***

329

6
20

65



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

(14)

MCN-NSN: 4510-P1-050-51000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 15 UNIT COST: 12.03 TOTAL COST: 180.45
LOCATION:
DESCRIPTION: SHOWER HEAD, NEW TYPE FOR HP-51, WITH RUBBER INSERT HEADS
S/S PALMETTO, 1-800-830-0426
PART # P105-051

(15)

211

MCN-NSN: 4510-P0-24--20100 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 8 UNIT COST: 7.82 TOTAL COST: 62.56
DESCRIPTION: HANDLE FOR FAUCET FOR HP-301
S/S PALMETTO, 1-800-830-0426
PART # P024-201

(16)

212

MCN-NSN: 4510-P0-99--24500 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 14 UNIT COST: 7.13 TOTAL COST: 99.82
DESCRIPTION: FAUCET STEM FOR HP-301
S/S PALMETTO, 1-800-830-0426
PART # P099-245 HOT & COLD

(17)

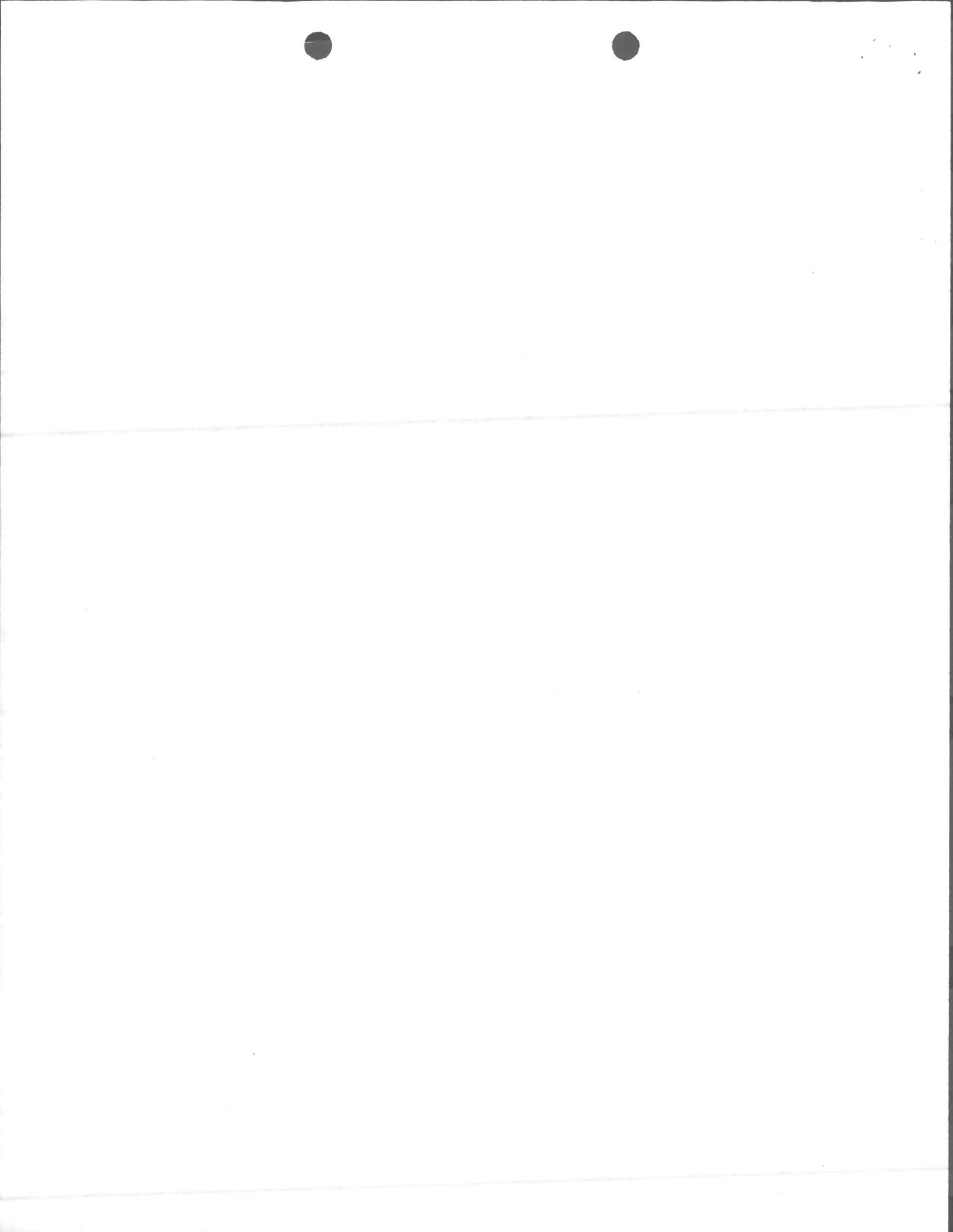
MCN-NSN: 4510-RP-607-90000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 1 UNIT COST: 7.16 TOTAL COST: 7.16
DESCRIPTION: BONNET FOR DELTA SHOWER VALVE HP-301
S/S PALMETTO, 1-800-830-0426
PART # RP60790

(18)

MCN-NSN: 4510-RP-611-70000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: ~~1~~ 2 UNIT COST: 22.95 TOTAL COST: 45.90
DESCRIPTION: HANDLE FOR DELTA SHOWER VALVE HP-301
S/S PALMETTO, 1-800-830-0426
PART # RP6117

Rev 81

(19)



EPS JOB: HP 301

DATE: 01/03/20

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

PAGE: 9

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

214

(19)

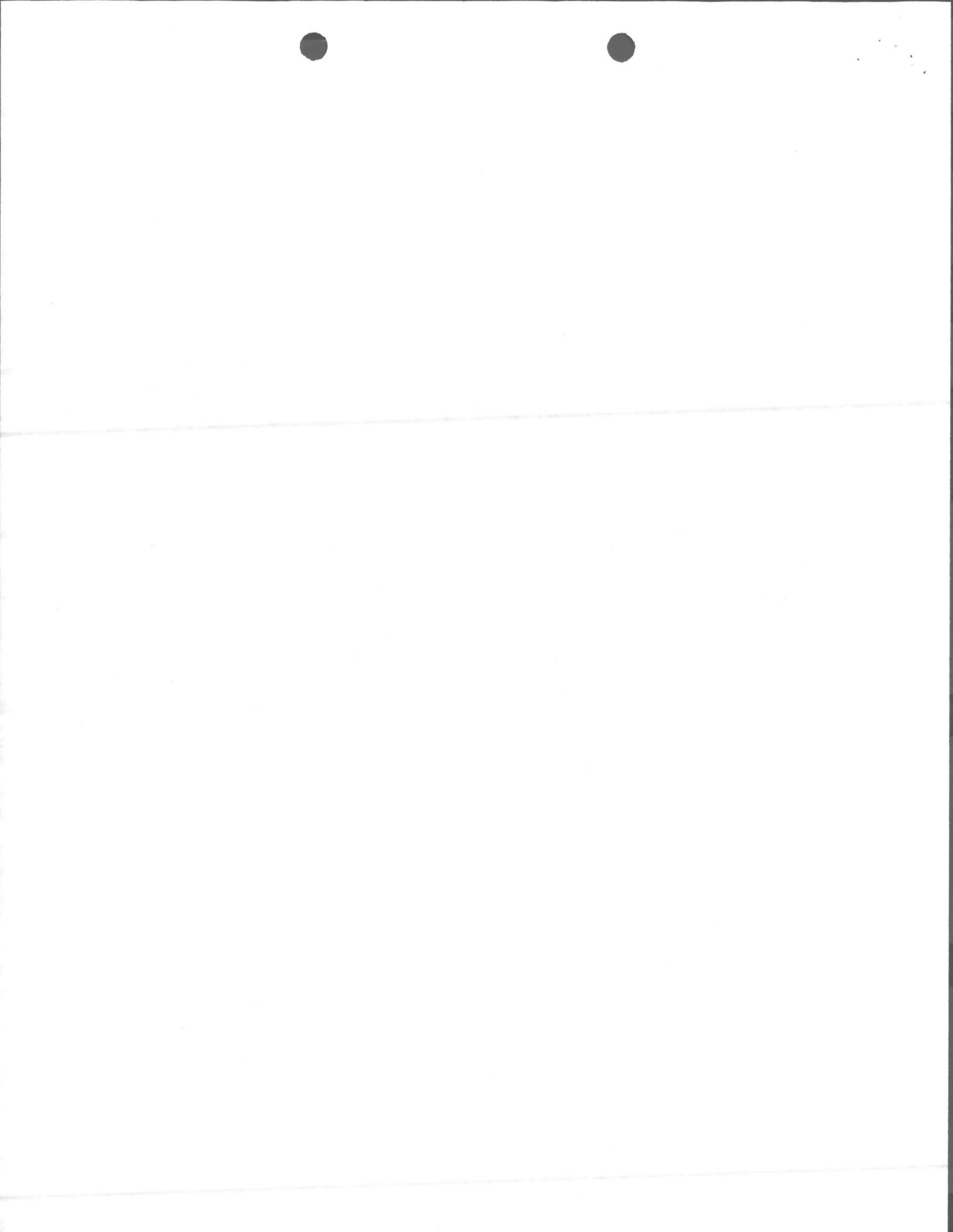
MCN-NSN: 4510-RF-757-70000	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: PAL
QUANTITY: 1	UNIT COST: 23.98	TOTAL COST: 23.98
DESCRIPTION: ESCHUTCHEION FOR DELTA, HP-301 SHOWER VALVE		
S/S PALMETTO, 1-800-830-0426		
PART # RP7577		

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. .

SOS TOTAL COST: \$419.87

*** CONTINUED ON PAGE 10 ***

(7)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 4106

(20) *21*

MCN-NSN: 4510-P0-99--10900 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PLA
QUANTITY: *24* UNIT COST: 16.95 TOTAL COST: ~~33.90~~
DESCRIPTION: SHOWER VALVE CARTRIDGE FOR HP-301 *\$67.80*
S/S PALMETTO, 1-800-830-0426
PART #P099-109

SOS TOTAL COST: \$33.90

PHASE TOTAL COST: \$898.51

(21)

Kevin P. Plene Add
John Yankosky 3/20/01
6210-00-299-7217

GLOBE, GLASS JELLY JAM

QUANTITY 6 ea *\$2.10* *= 12.60*

133

5 3333

FC-303

PM

(22)



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 1 OF _____

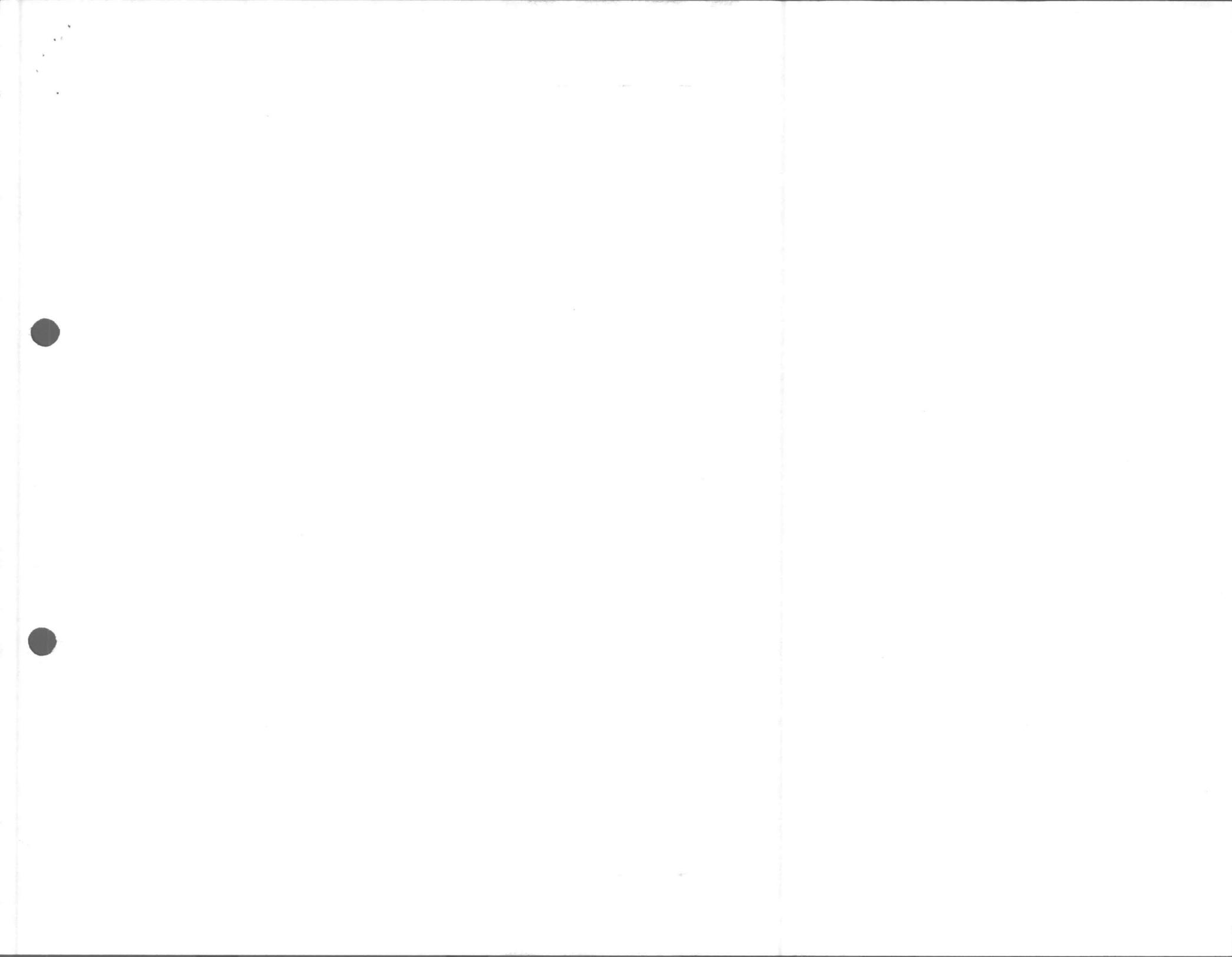
INSPECTION AREAS	ROOM # <u>102</u>			ROOM # <u>104</u>			ROOM # <u>106</u>			ROOM # <u>108</u>			ROOM # <u>OFFICE</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>OFFICE</u>														
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD
 ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 13



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 2 OF _____

INSPECTION AREAS	ROOM # <u>OFFICE</u>														
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>OFFICE</u>			ROOM # <u>130</u>			ROOM # <u>132</u>			ROOM # <u>134</u>			ROOM # <u>136</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

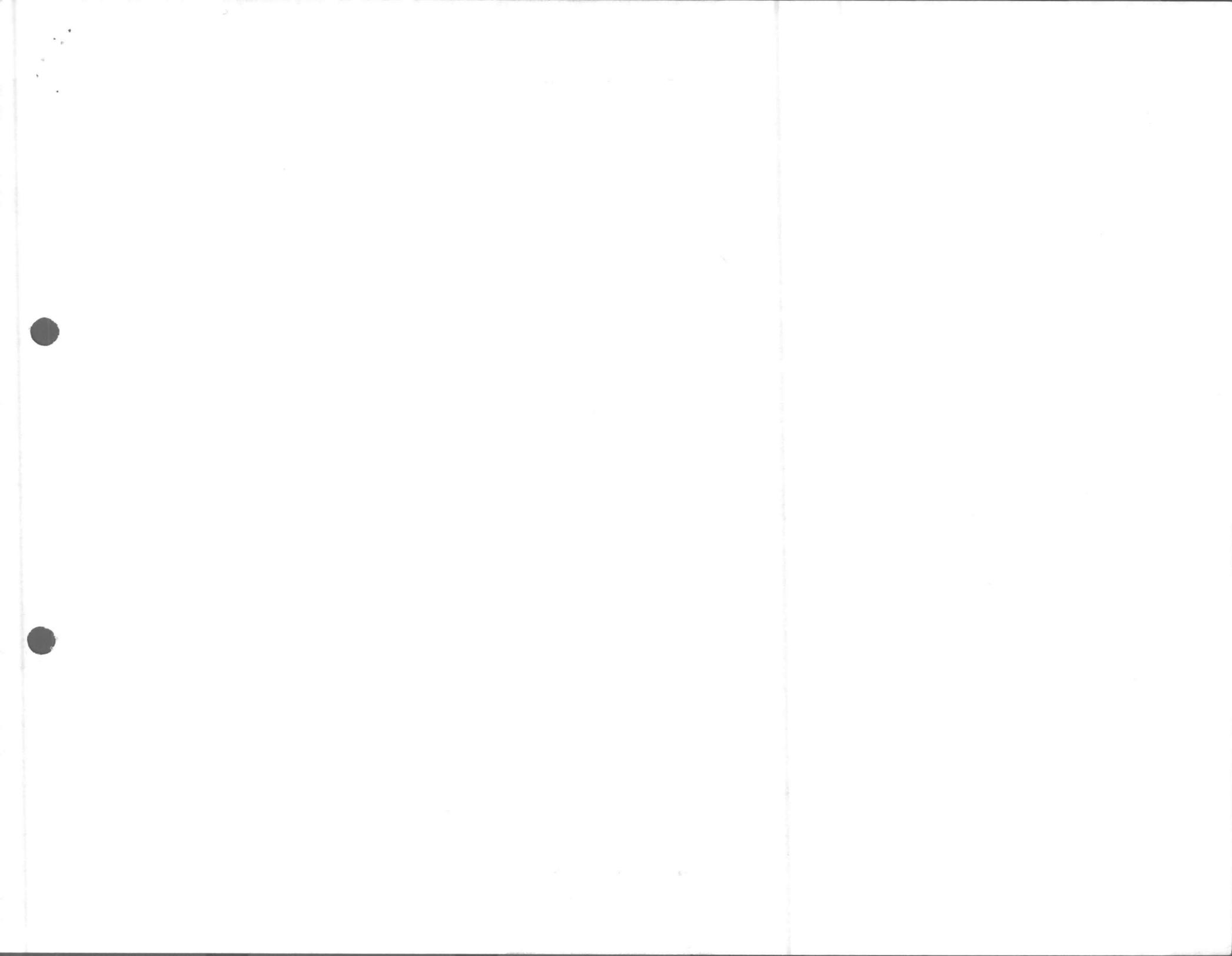
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 14



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 3 OF _____

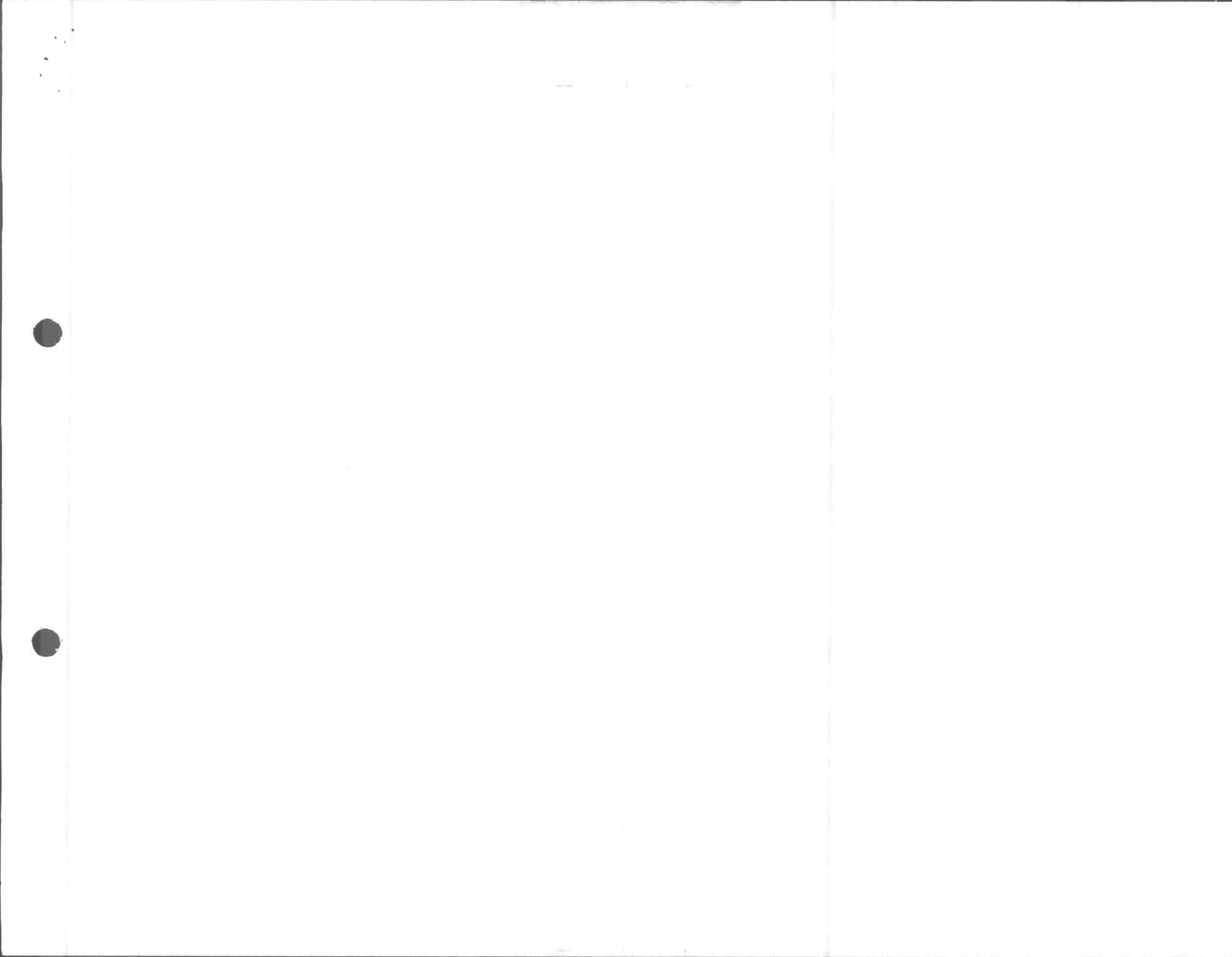
INSPECTION AREAS	ROOM # <u>135</u>			ROOM # <u>133</u>			ROOM # <u>131</u>			ROOM # <u>OFFICE</u>			ROOM # <u>OFFICE</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>OFFICE</u>														
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD
ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 15



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 4 OF _____

INSPECTION AREAS	ROOM # <u>6 OFFICE</u>			ROOM # <u>OFFICE</u>			ROOM # <u>6 OFFICE</u>			ROOM # <u>105</u>			ROOM # <u>103</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>101</u>			ROOM #			ROOM #			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

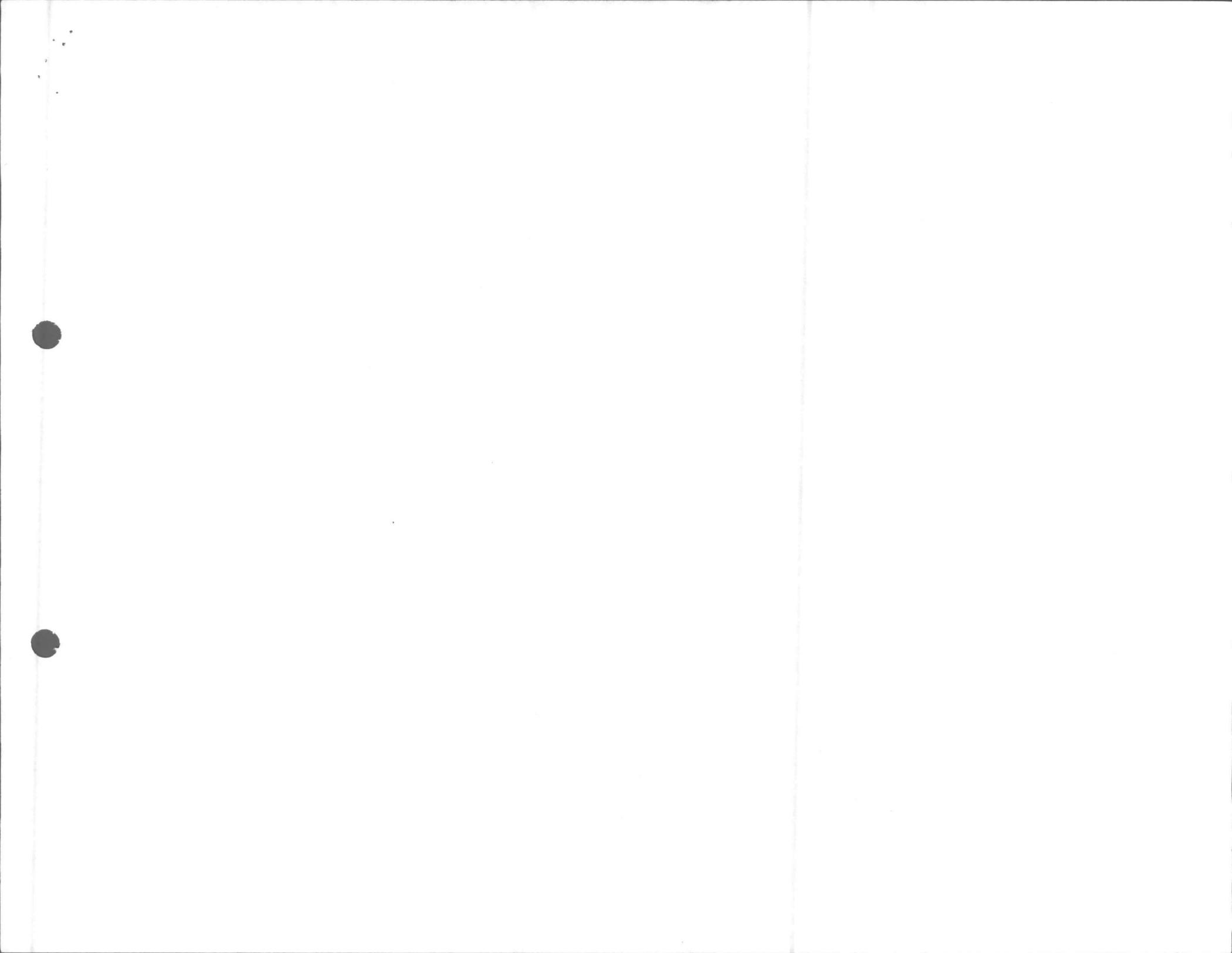
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 16



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 5 OF _____

INSPECTION AREAS	ROOM # <u>202</u>			ROOM # <u>204</u>			ROOM # <u>206</u>			ROOM # <u>208</u>			ROOM # <u>210</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>212</u>			ROOM # <u>214</u>			ROOM # <u>216</u>			ROOM # <u>218</u>			ROOM # <u>220</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

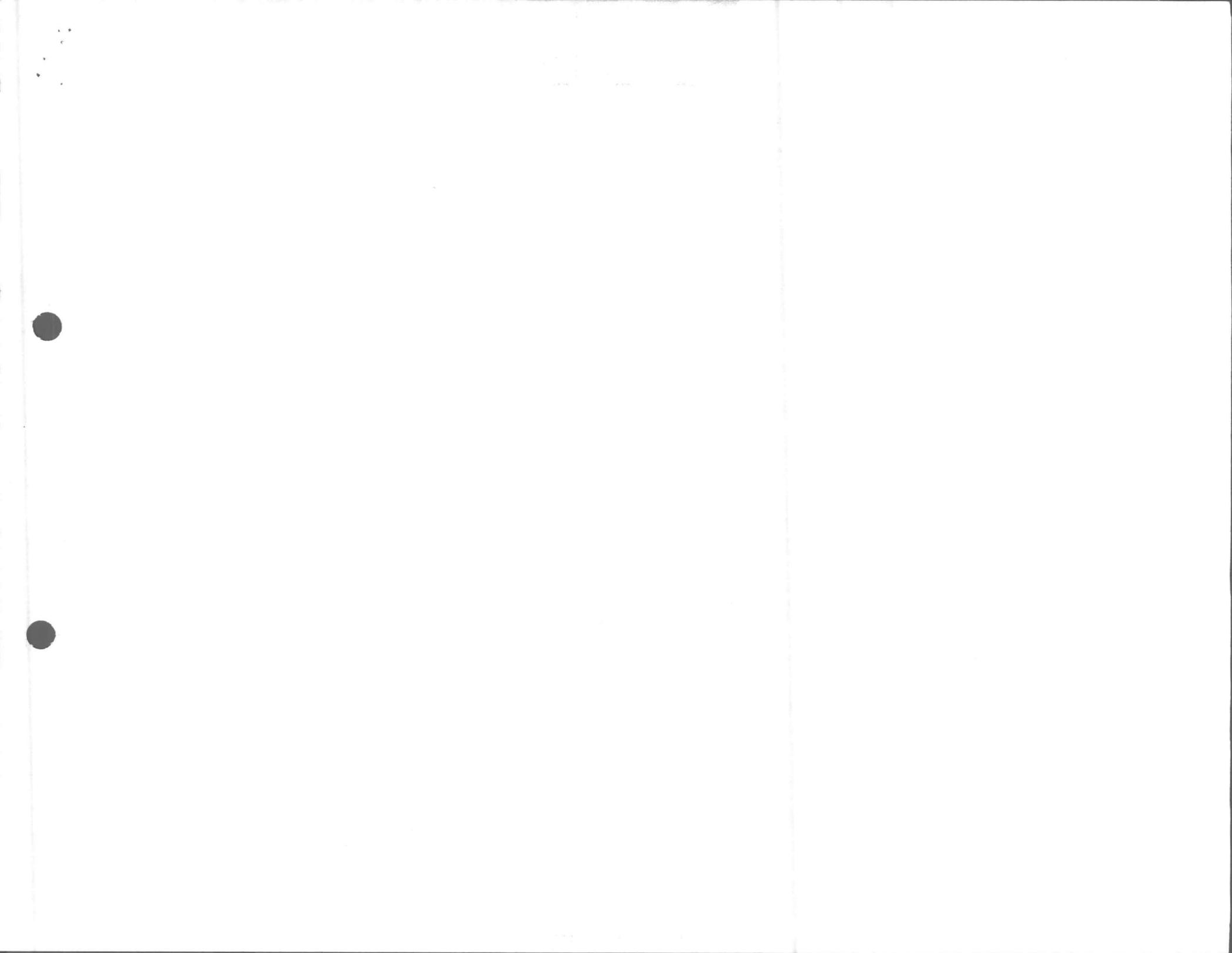
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 17



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 6 OF _____

INSPECTION AREAS	ROOM # <u>222</u>			ROOM # <u>224</u>			ROOM # <u>226</u>			ROOM # <u>228</u>			ROOM # <u>230</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>222</u>			ROOM # <u>234</u>			ROOM # <u>236</u>			ROOM # <u>235</u>			ROOM # <u>233</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															
Window placard															

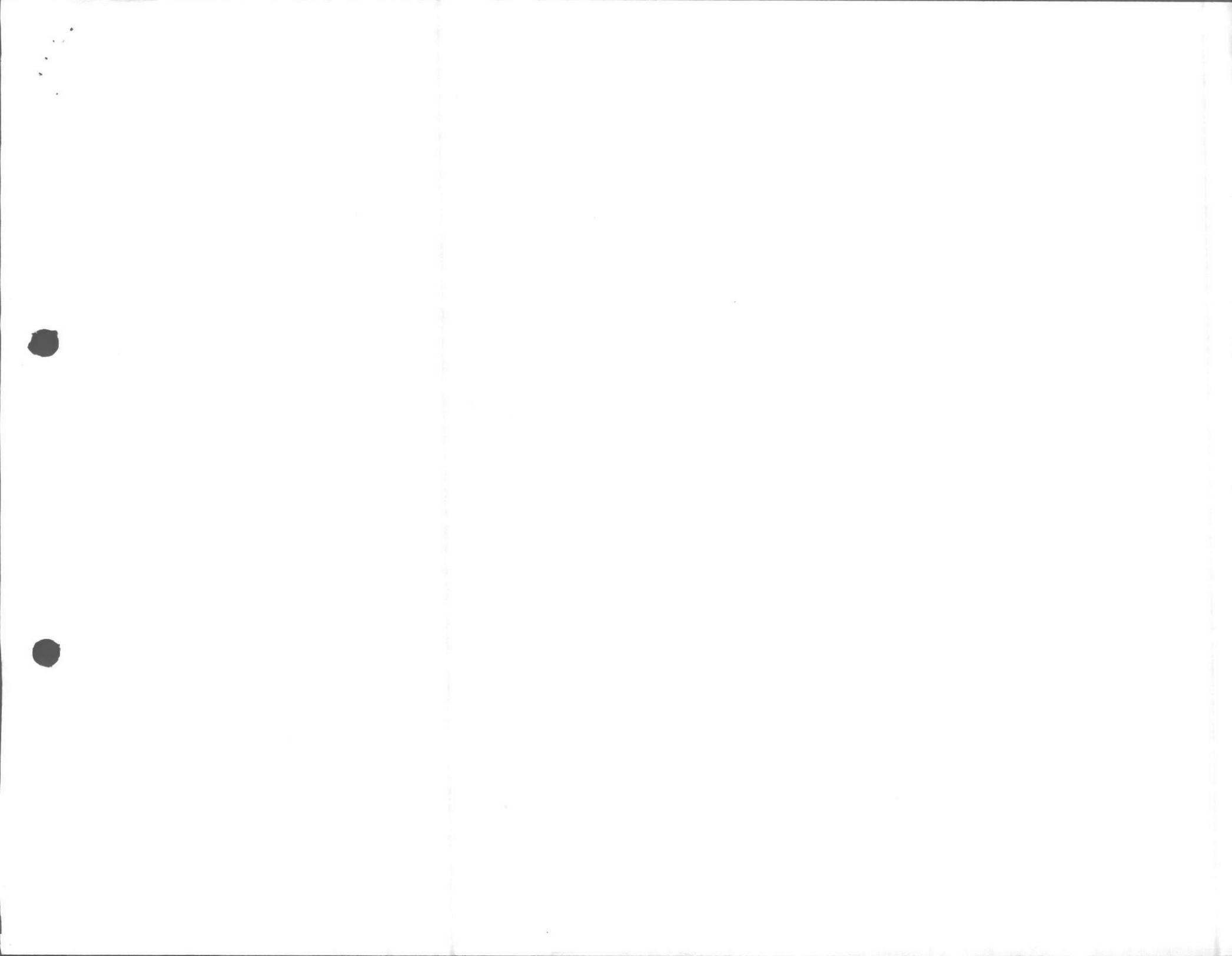
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING: _____

ROOM #'S ENTRANCE DOOR LOCK _____

ROOM#'S PAINT PEELING/MOLD _____

ROOM #'S WALL LOCKER NEEDS REPAIR _____

SHT # 18



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 7 OF _____

INSPECTION AREAS	ROOM # <u>231</u>			ROOM # <u>227</u>			ROOM # <u>225</u>			ROOM # <u>223</u>			ROOM # <u>221</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM # <u>219</u>			ROOM # <u>217</u>			ROOM # <u>215</u>			ROOM # <u>213</u>			ROOM # <u>211</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

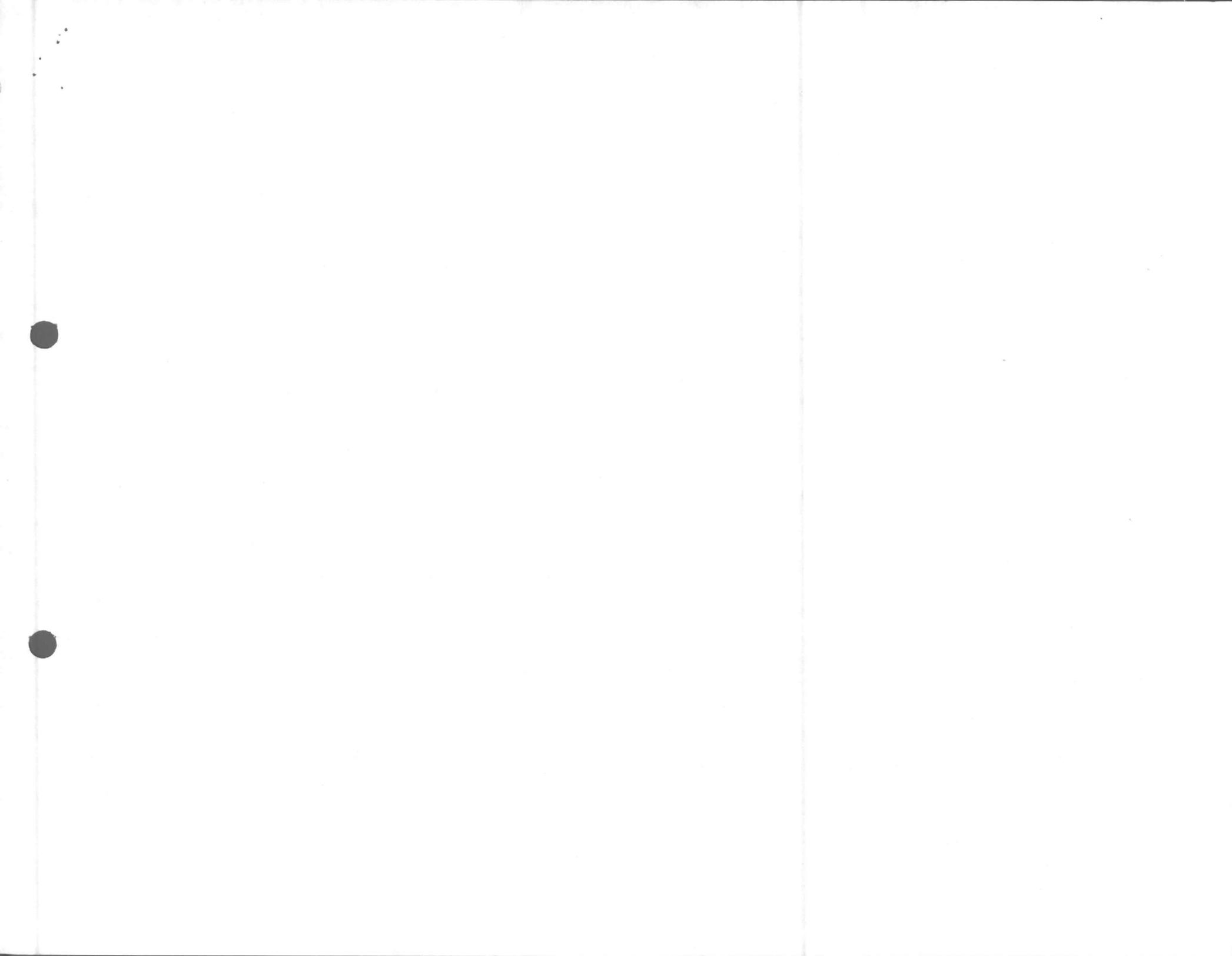
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 19



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 8 OF _____

INSPECTION AREAS	ROOM # <u>209</u>			ROOM # <u>205</u>			ROOM # <u>203</u>			ROOM # <u>201</u>			ROOM #		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM #			ROOM #											
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

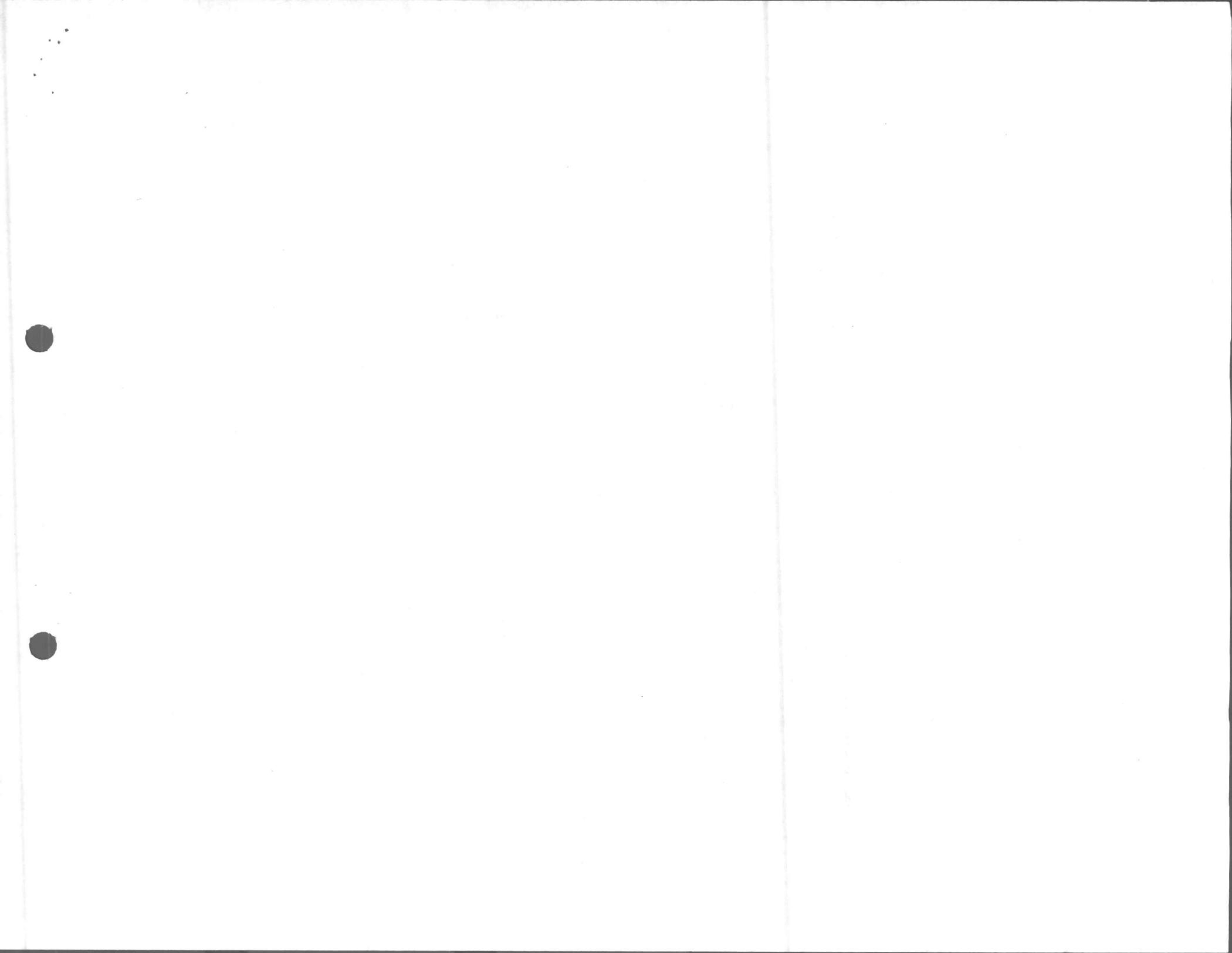
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM #'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 20



CYCLIC MAINTENANCE

AREA & FACILITY: HP-361

INSPECTOR _____

SHEET # 9 OF _____

INSPECTION AREAS	ROOM # <u>302</u>			ROOM # <u>304</u>			ROOM # <u>306</u>			ROOM # <u>308</u>			ROOM # <u>312</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM # <u>314</u>			ROOM # <u>316</u>			ROOM # <u>318</u>			ROOM # <u>320</u>			ROOM # <u>322</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

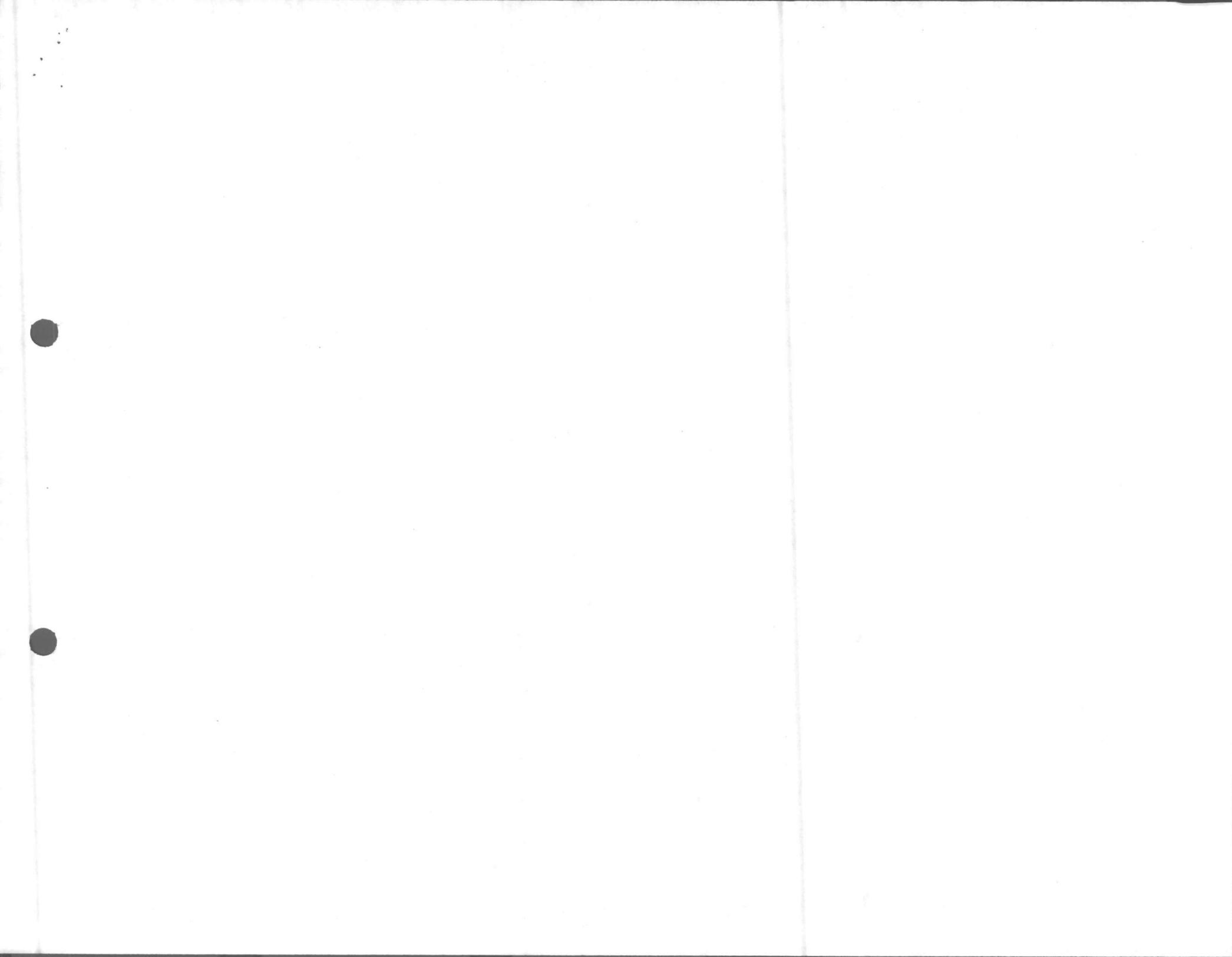
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM #'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 21



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 10 OF _____

INSPECTION AREAS	ROOM # <u>324</u>			ROOM # <u>326</u>			ROOM # <u>328</u>			ROOM # <u>330</u>			ROOM # <u>332</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM # <u>334</u>			ROOM # <u>336</u>			ROOM # <u>335</u>			ROOM # <u>333</u>			ROOM # <u>331</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

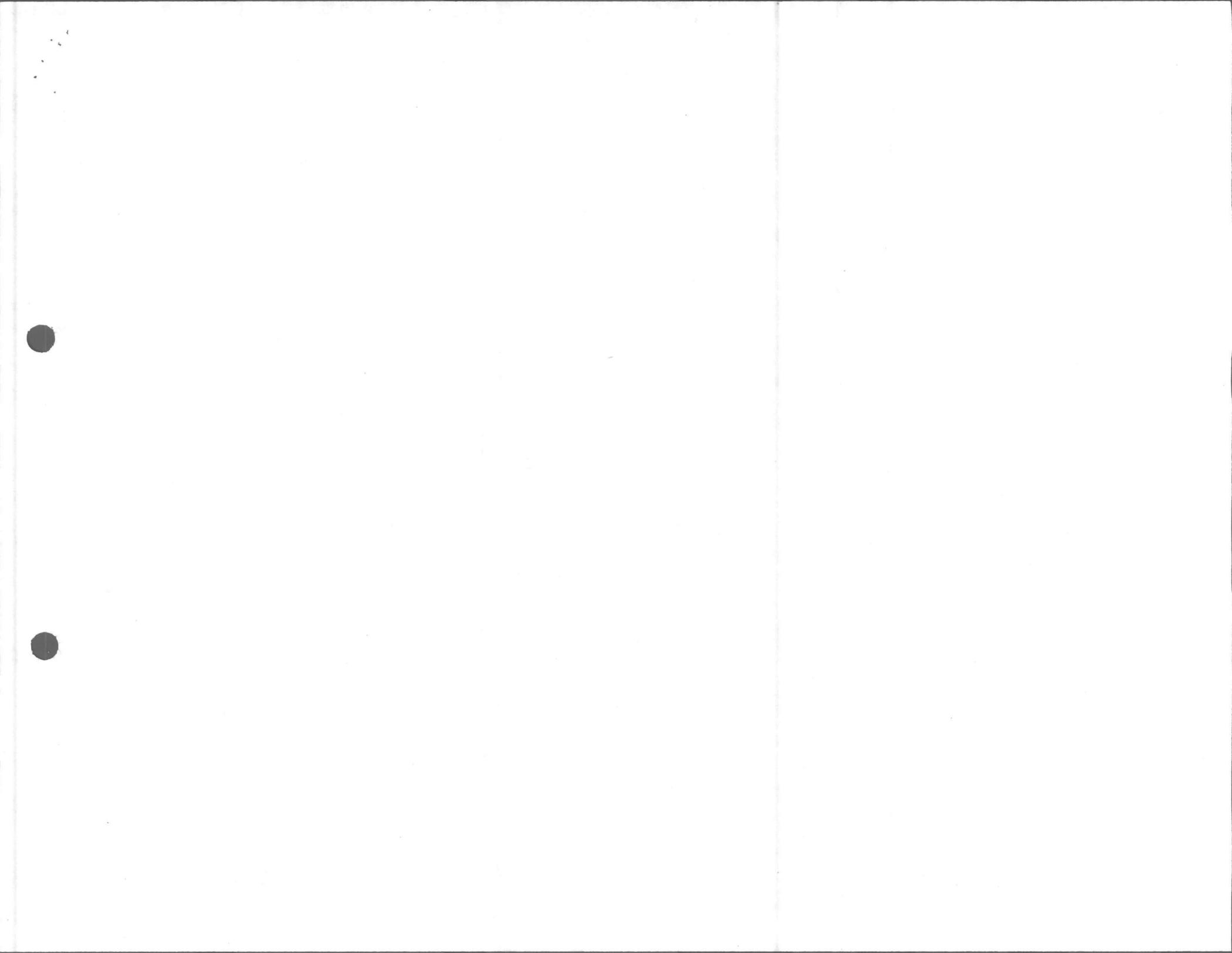
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM #'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 22



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 11 OF _____

INSPECTION AREAS	ROOM # <u>327</u>			ROOM # <u>325</u>			ROOM # <u>323</u>			ROOM # <u>321</u>			ROOM # <u>319</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>317</u>			ROOM # <u>315</u>			ROOM # <u>313</u>			ROOM # <u>311</u>			ROOM # <u>309</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

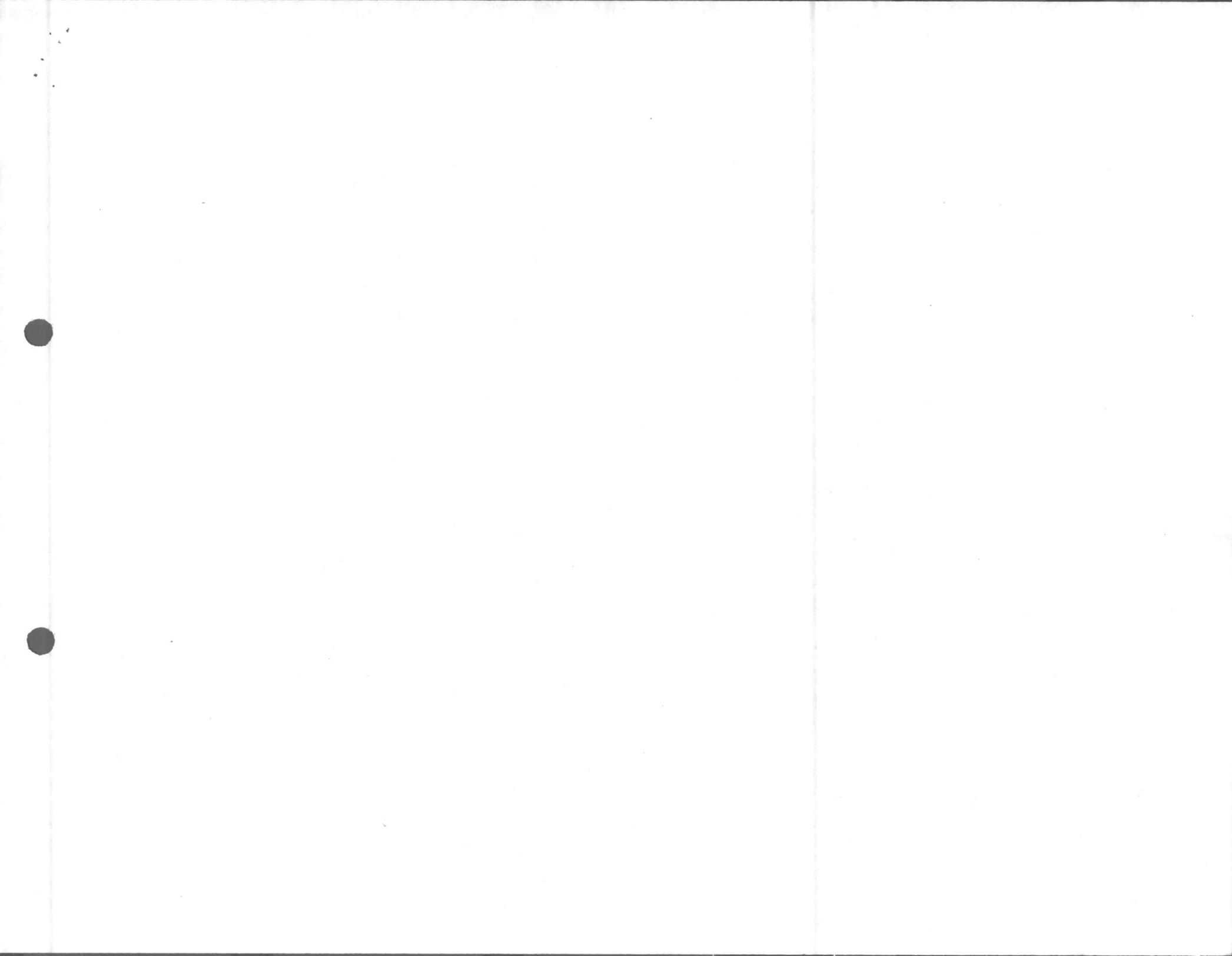
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 23



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 12 OF _____

INSPECTION AREAS	ROOM # <u>365</u>			ROOM # <u>363</u>			ROOM # <u>301</u>			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM #			ROOM #			ROOM #			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

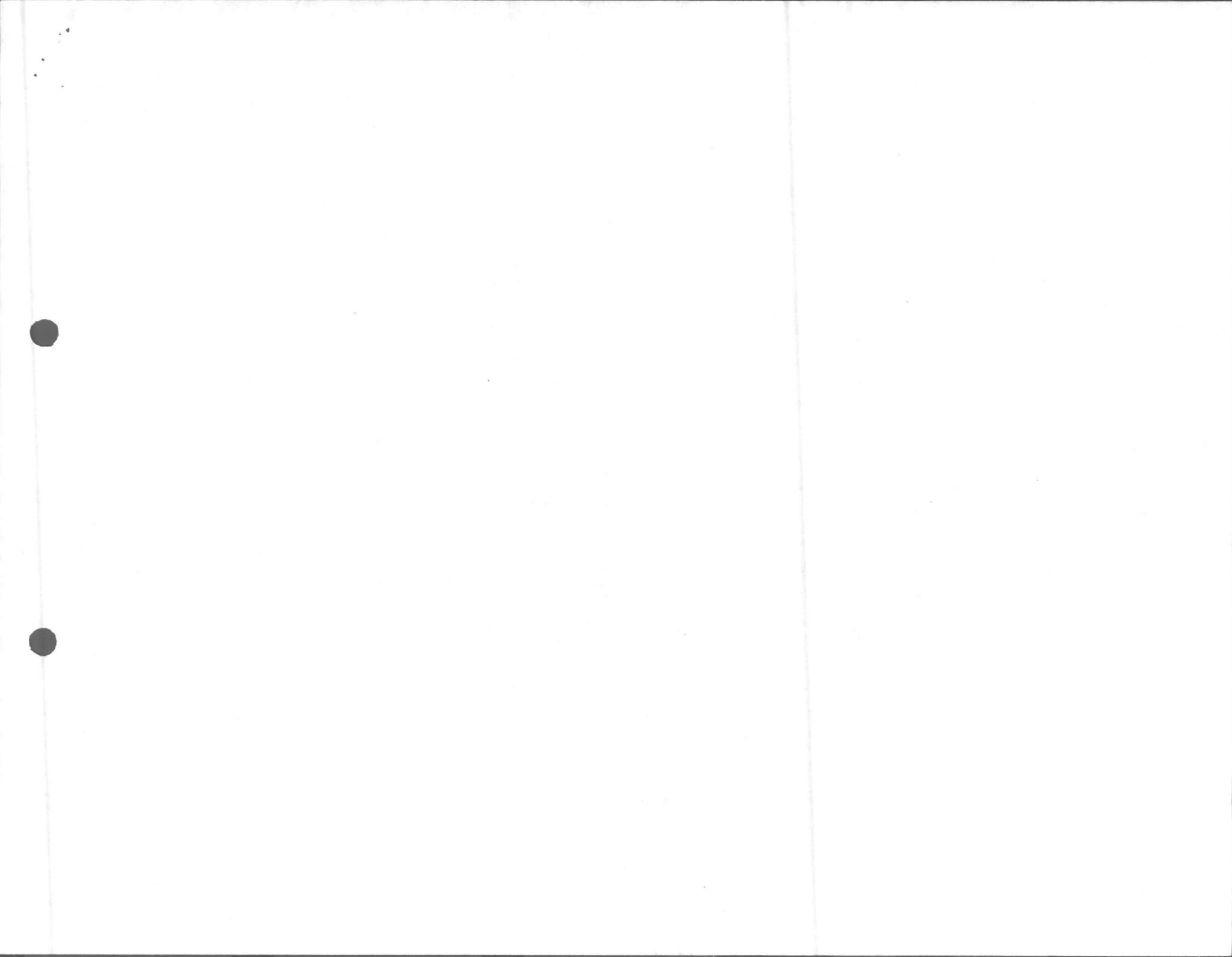
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 24



OYOLIO MAINTENANCE

AREA & FACILITY: _____

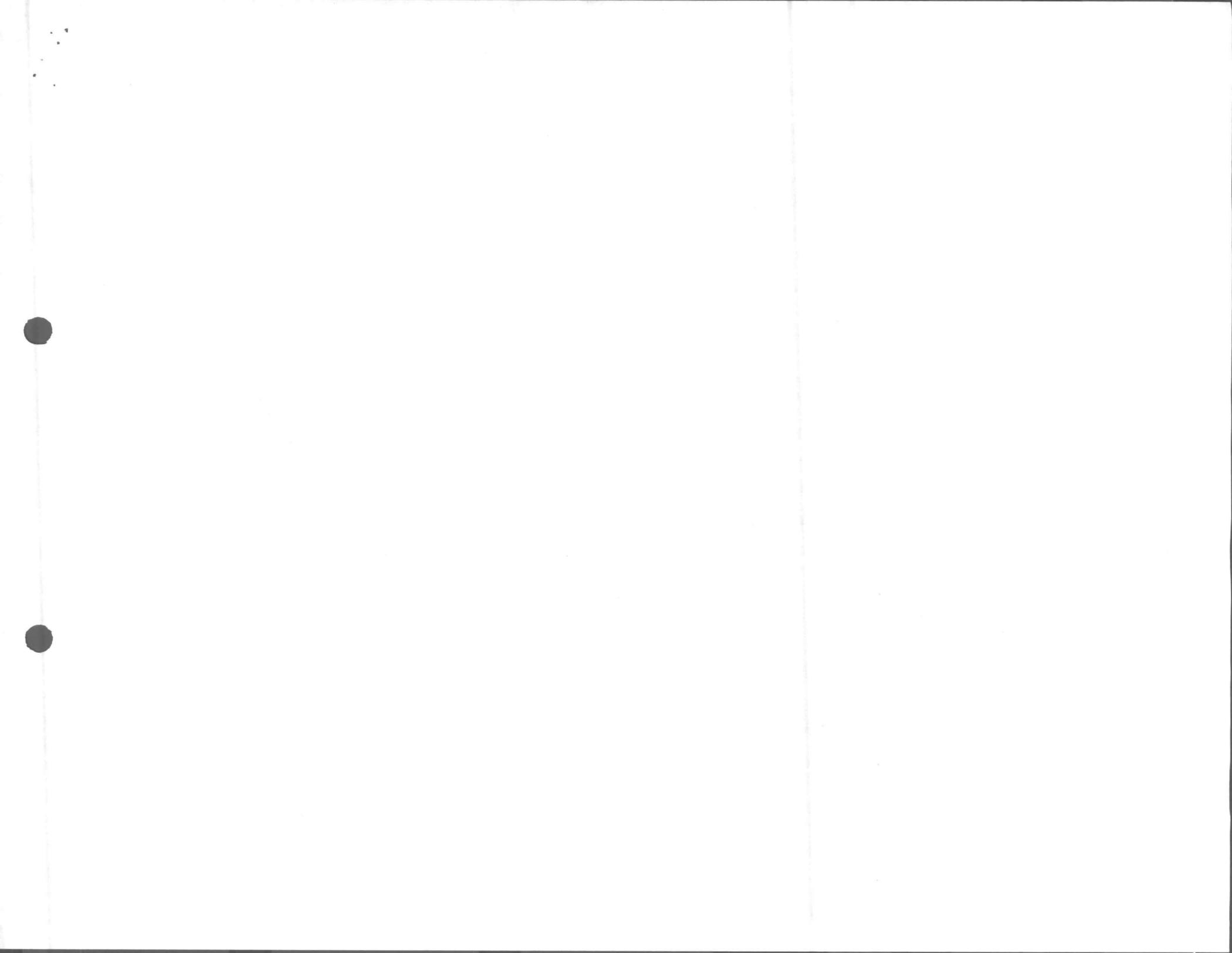
INSPECTOR: _____

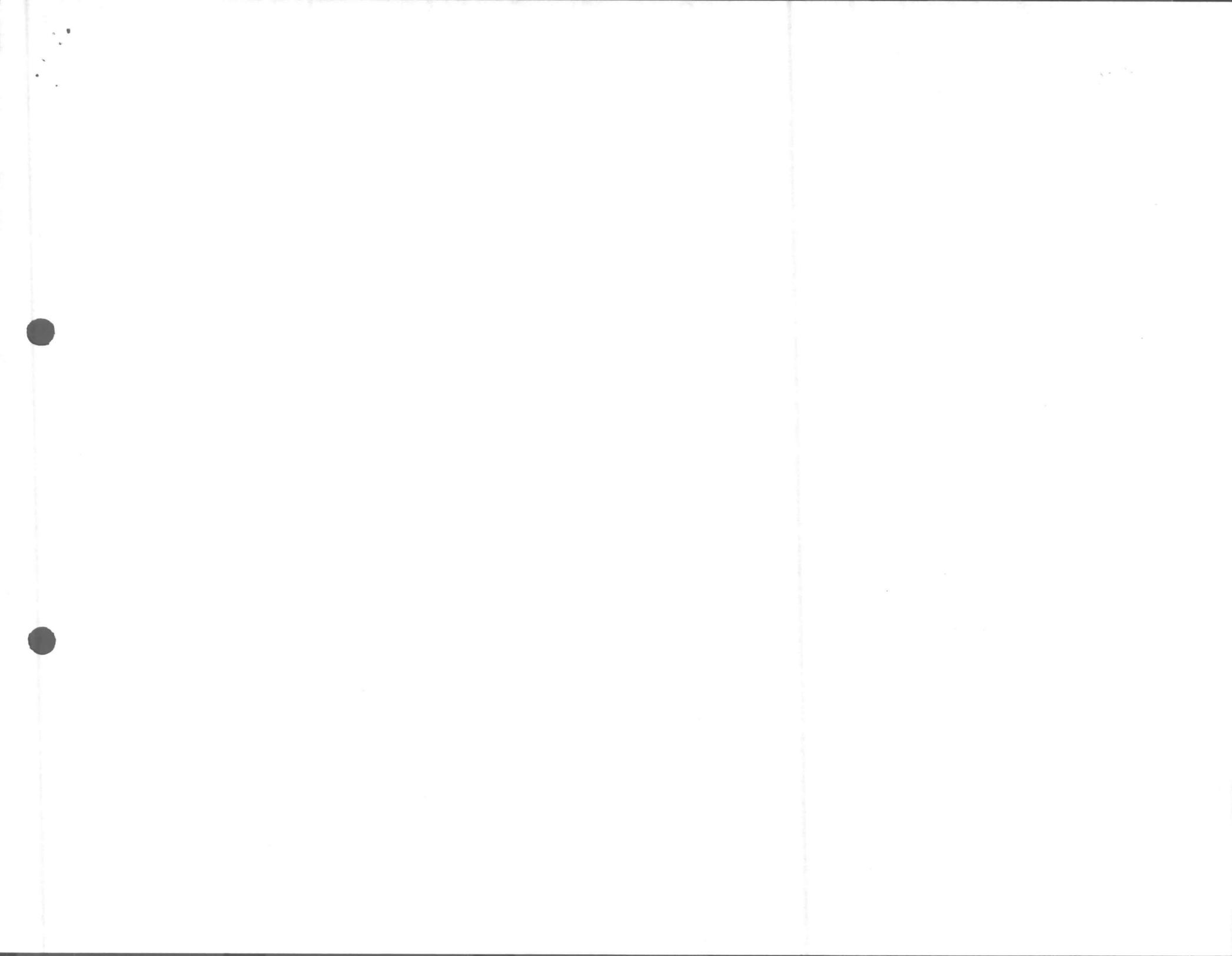
SHEET # _____ OF _____

INSPECTION AREAS:	Passage Way			Lounge			Laundry Room			Public Head			Duty Hut		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS

REMARKS: _____

20





CYCLIC MAINTENANCE

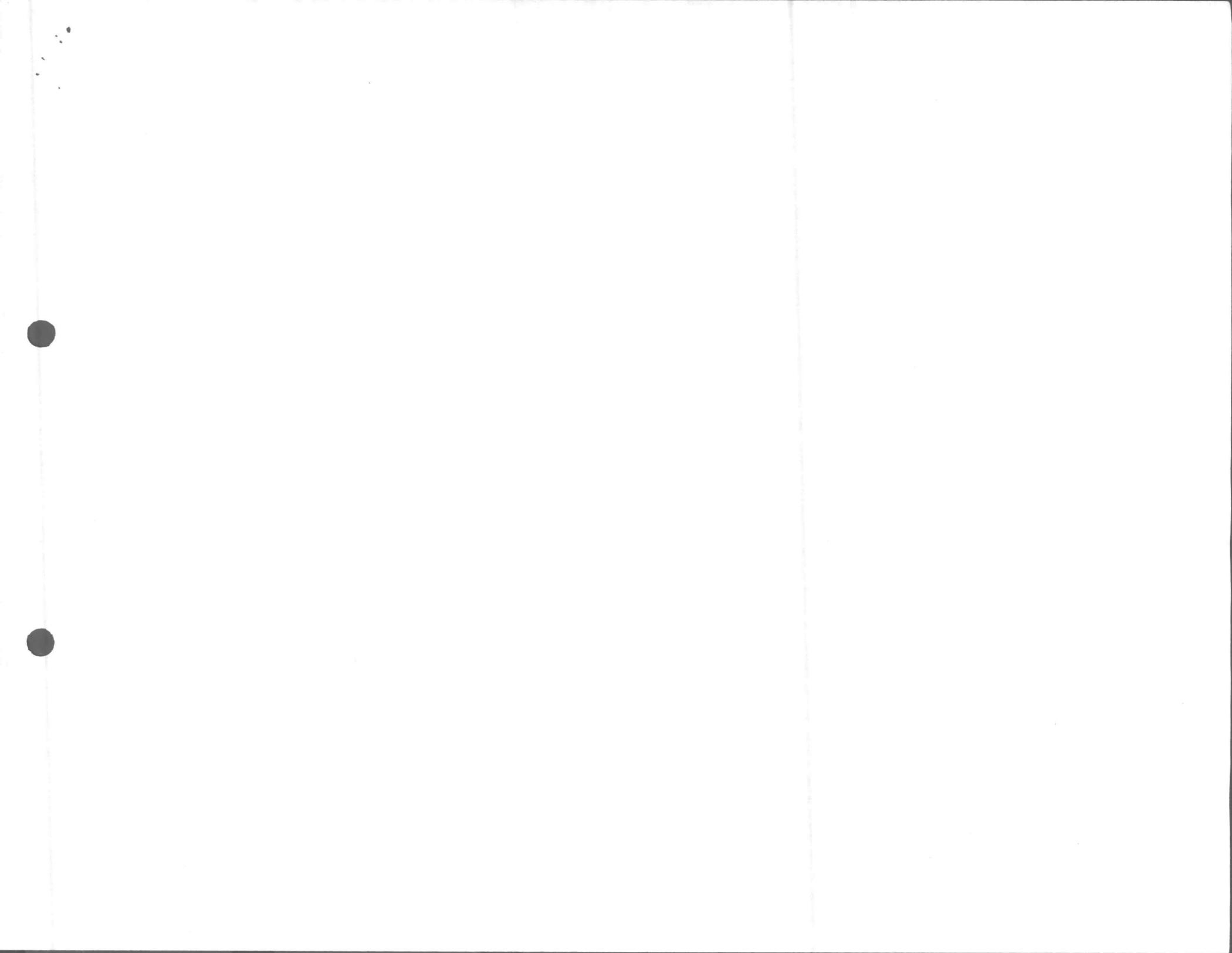
AREA & FACILITY: _____

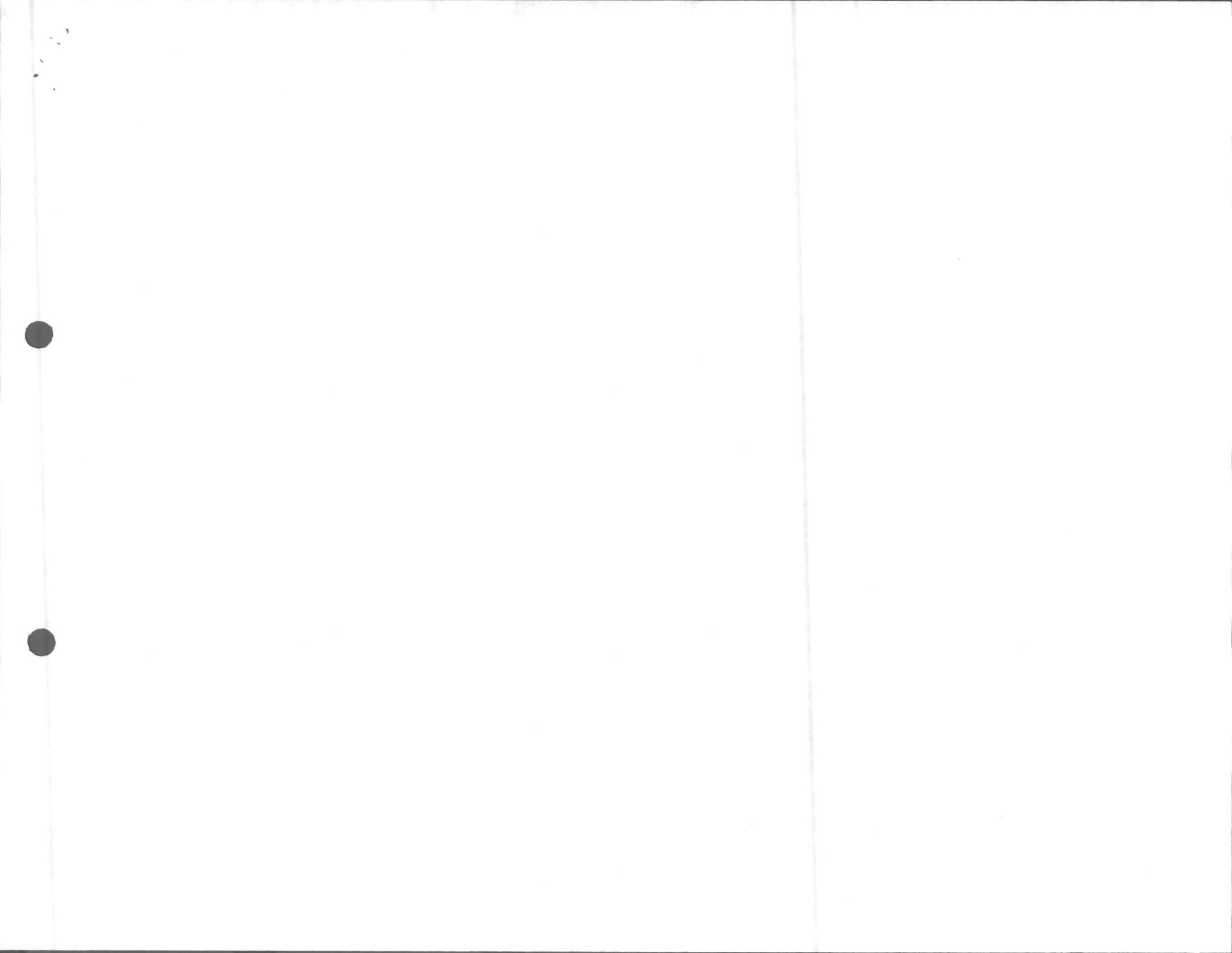
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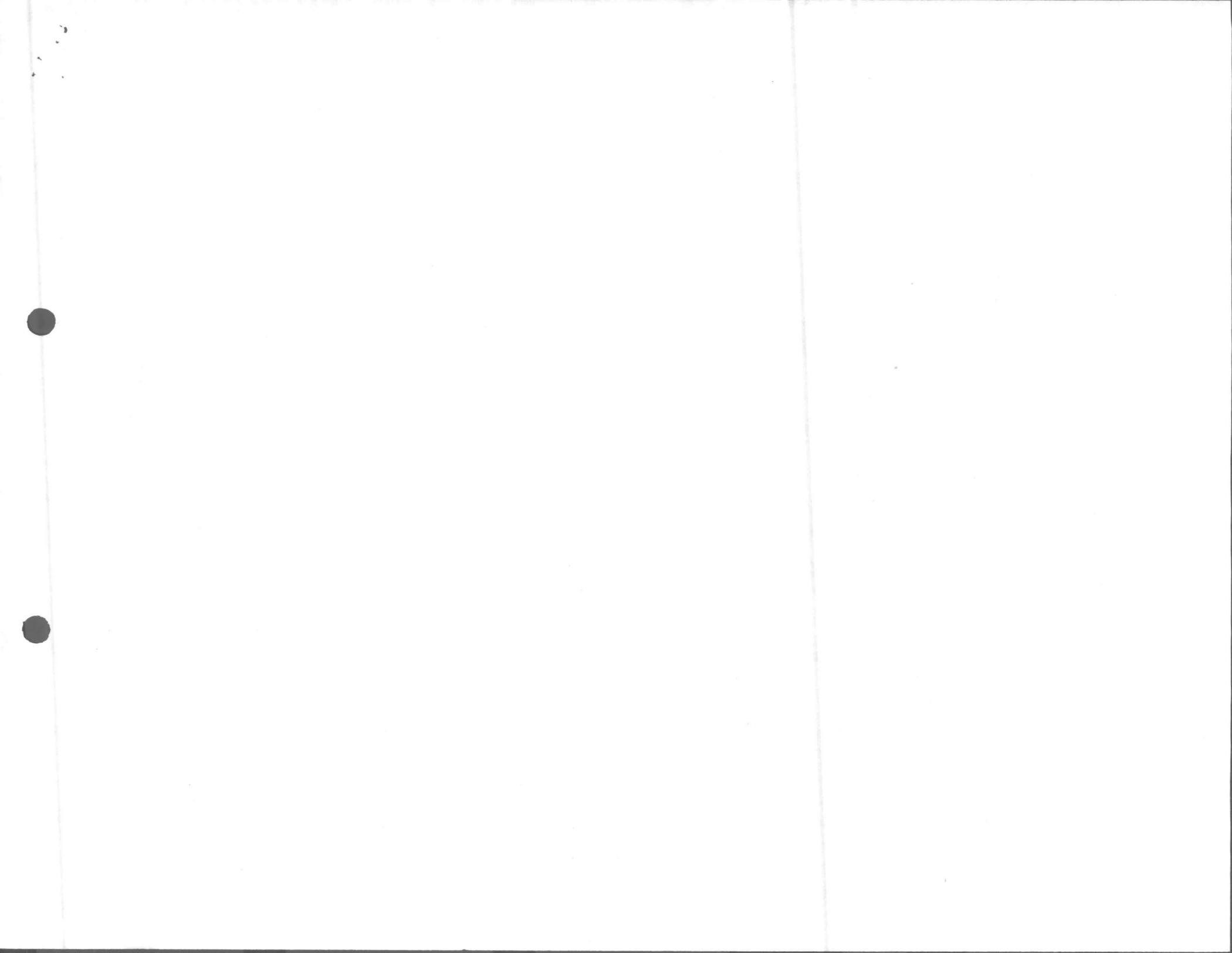
SHEET # _____ OF _____

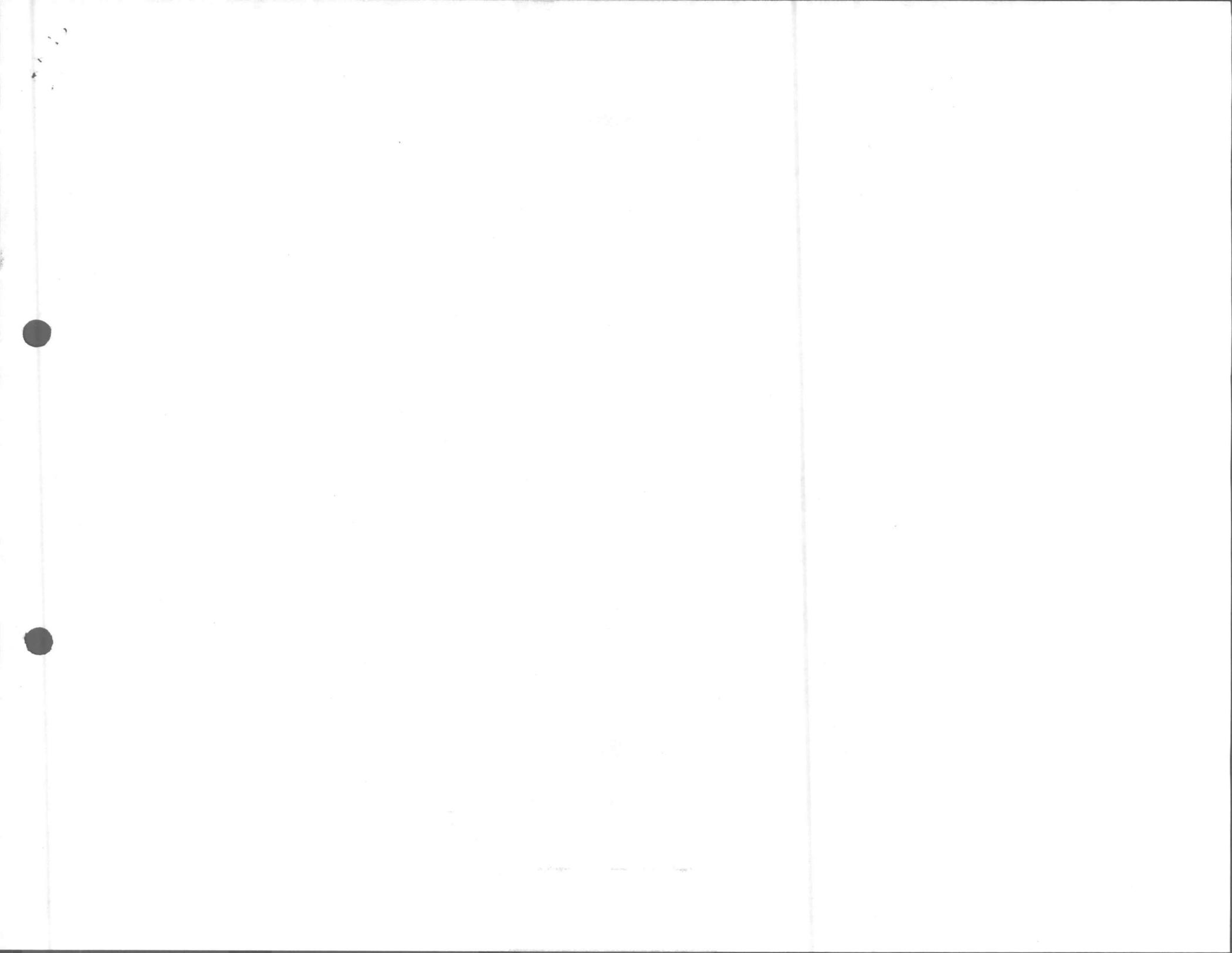
INSPECTION AREAS:	Passage Way			Lounge			Laundry Room			Public Head			Duty Hut		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS

REMARKS: _____

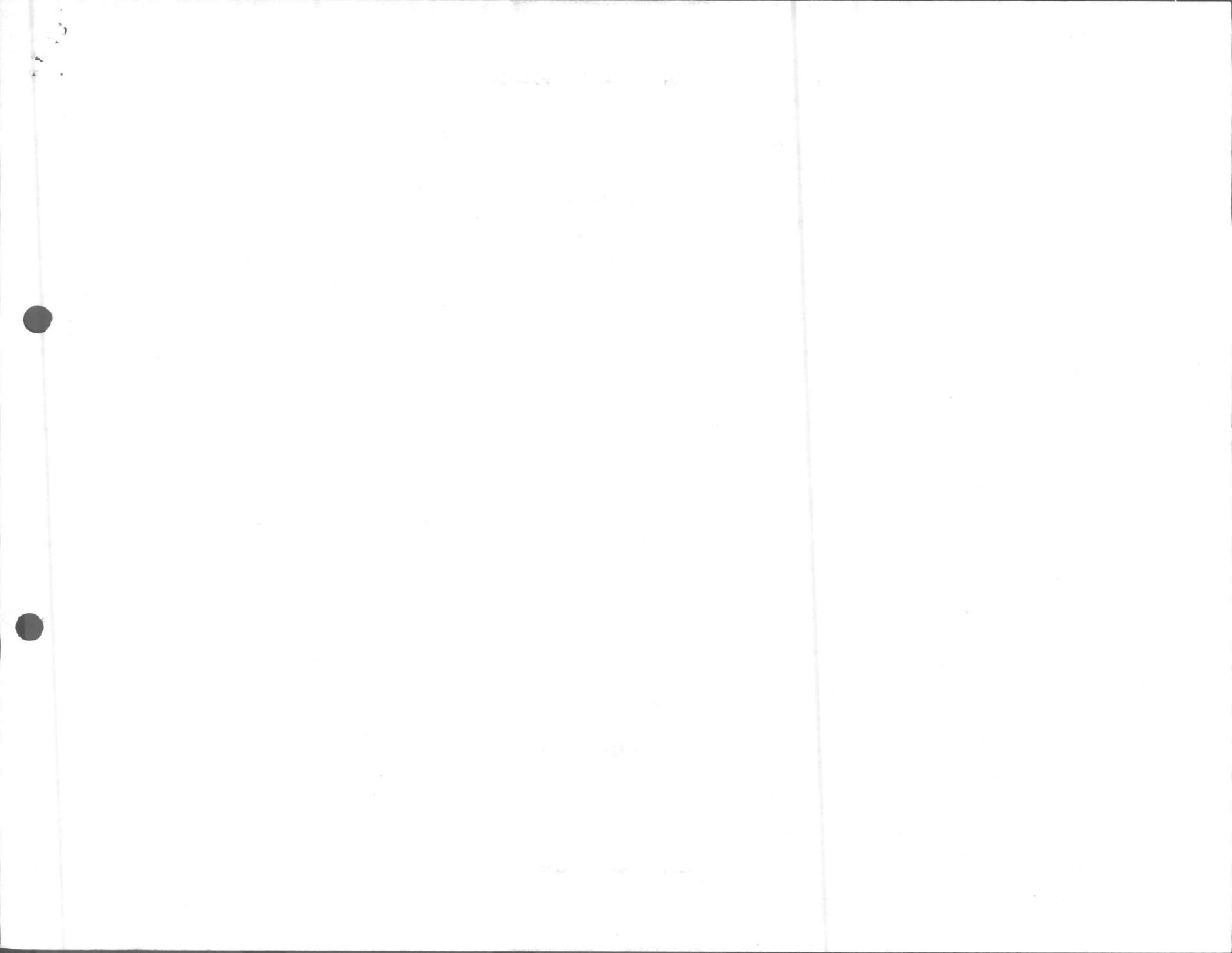




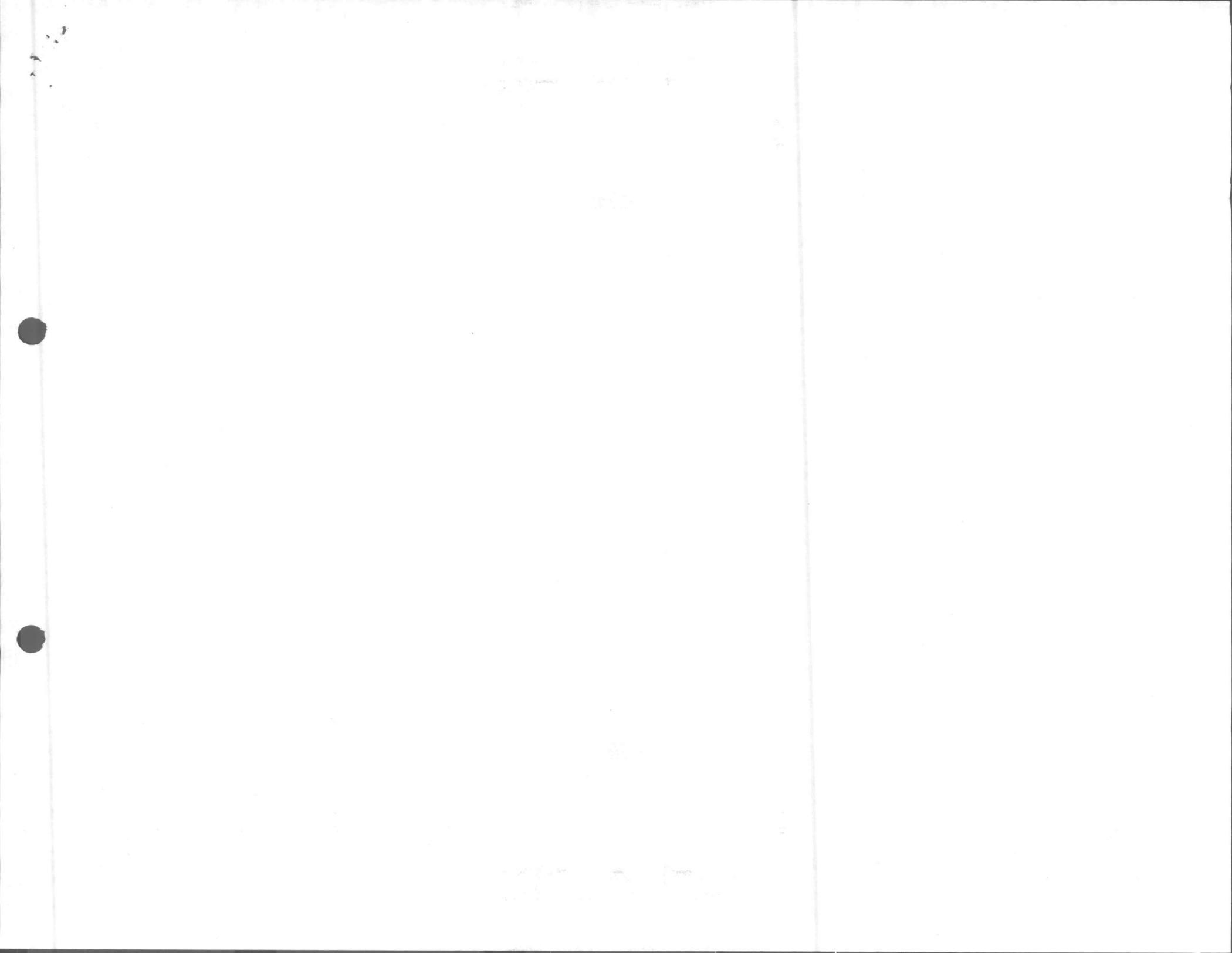




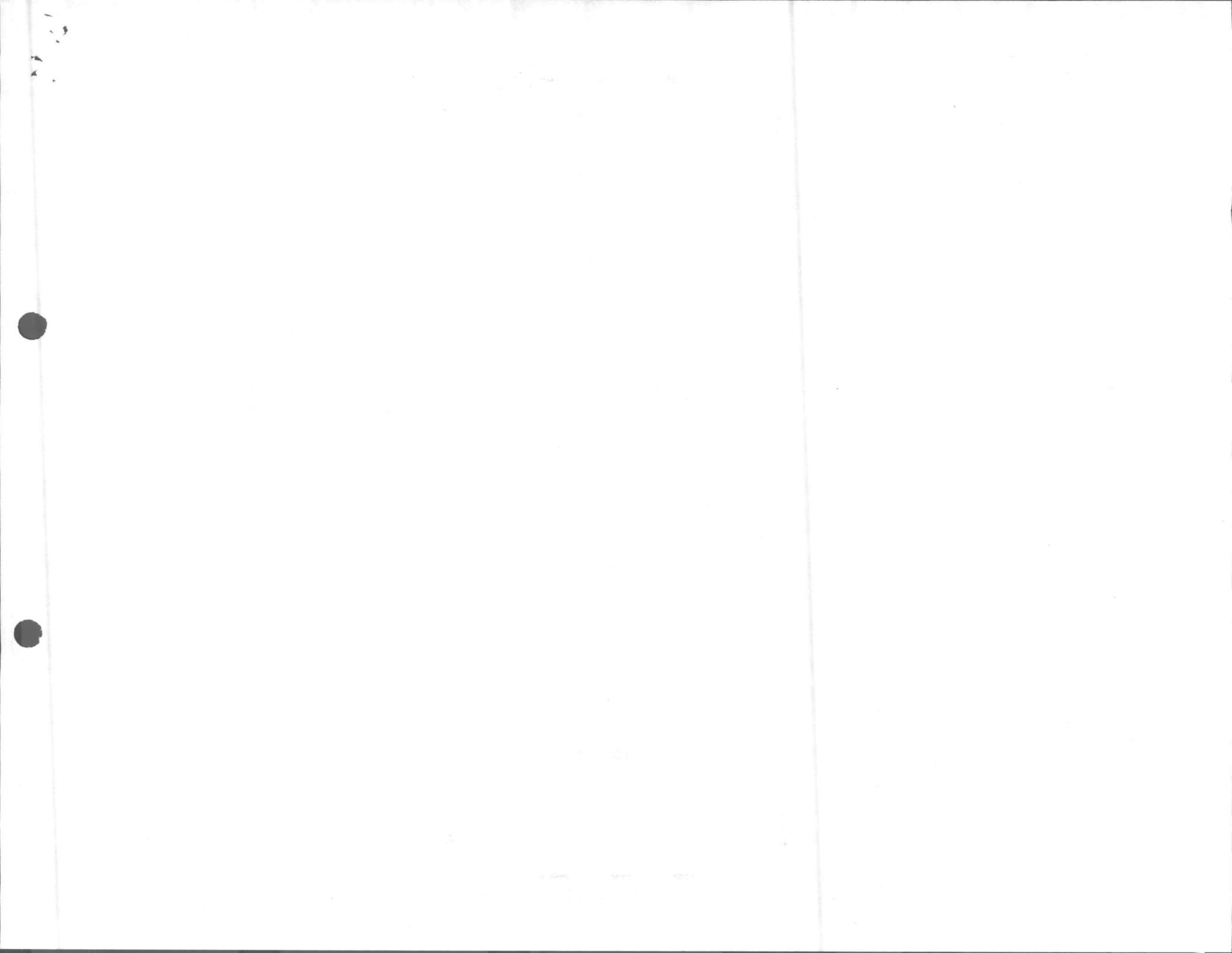
CSI	Item Description for HQ 101	Takeoff Qty	Unit	Mat Total	Subs Total	ACTUAL QU
01	General Requirements					
11520500	WORK TRAILER, SET UP		each			
11832350	TIME ALLOWED FOR SECURING TOOLS DAILY		DAYS			
11832350	TIME ALLOWED FOR CLEANUP PER ROOM		ROOM			
11832350	ESTIMATED TIME FOR GOING IN ROOMS WITH NO IDENTIFIED DESCR.		ROOM			
11832350	ESTIMATED TIME FOR REPAIRS ON BLDG WITH NO INSPECTION		ROOM			
11832350	TIME ALLOWED FOR DOCUMENTING REQUIRED REPAIRS IN ROOM		UNITS			
11832350	TIME ALLOWED FOR MECHANICAL REPAIRS	32.0	UNITS			
11832350	TIME ALLOWED FOR ELECTRICAL REPAIRS	32.0	UNITS			
11832350	TIME ALLOWED FOR STRUCTURAL REPAIRS.	32.0	UNITS			
General Requirements Total						
06	Wood & Plastics					
16110530	Framing joists, 2x8,mout/bolt concrete, sec dryers		each			
Wood & Plastics Total						
08	Doors & Windows					
18710340	Doorstops, kick down pad, replace		each			
18710340	Door stop, holder, wall mounted with hook and bumper		each			
18710340	Pull handle, install, passageway door		each			
18710340	Door stop, kick down, mounted on door		each			
18710400	Lock, bathroom, passageway/ replace		each			
18710400	Passageway door, lock set, repair		each			
18720800	Threshold, install new		each			
18720800	Cover, drain, install on drain		each			
18720800	Vanity, cabinet hinges, secure		each			
18720800	Vanity, cabinet door, replace		each			
18720800	Vanity, cabinet door secure		each			
18720800	Vanity, cabinet hinges, replace		each			
18720800	Wall locker, repair		each			
18720800	Window, spray frosted tint to secure vision.		each			
18720800	Tile, ceramic around shower drain		each			
18720800	Tile, floor tile replace		each			
18720800	Window, lock replace		each			
18720800	Drip cap, secure		each			
18720800	Threshold, secure, existing unit		each			
Doors & Windows Total						
09	Finishes					
19510700	Tile, ceiling, remove ceiling fan & replace ceiling tile		each			
19510700	Tile, ceiling tile splein 2 x 2 ft		each			
19510700	Tile, ceiling 2 x 4' replace		each			
19510700	Tile, celing tile splein 1 x 4 ft		each			
19510700	Tile,ceiling, 2 x 2, replace		each			
Finishes Total						
10	Specialties					
10430200	signs, room, instal		each			
10430200	signs, toilet/sink etc., number identification		each			
10430200	signs, build.numb., instal		each			



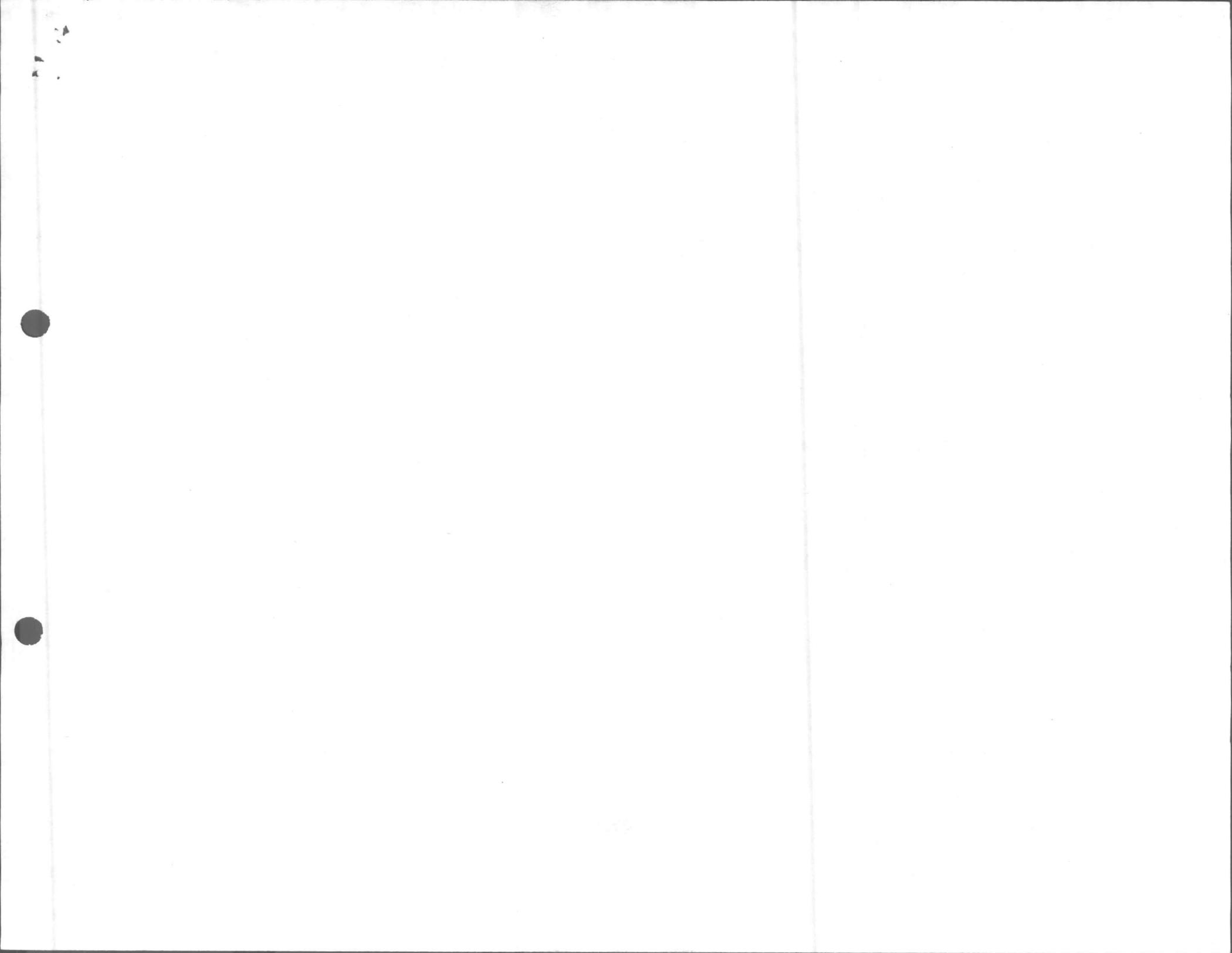
CSI	Item Description for HQ 101	Takeoff Qty	Unit	Mat Total	Subs Total	ACTUAL QU
I0820100	Bathroom accessories, mirror 30 x 30		each			
I0820100	Mirror, bathroom, 18 x 24.		each			
I0820100	Bathroom accessories, toilet seat, rem.old & replace		each			
I0820100	Bathroom accessories, toilet paper roller.		each			
I0820100	Bathroom accessories, toilet paper holder, install new		each			
I0820100	Bathroom accessories, towel bar, stainless steel, 18" long		each			
I0820100	Bathroom accessories, towel hook, secure		each			
I0820100	Bathroom accessories, coat hook, install		each			
I0820100	Bathroom accessories, towel bar, stainless steel, 30" long		each			
I0820100	Bathroom accessories, towel bar install, 24"		each			
I0820100	Bathroom accessories, toilet partition, secure		each			
I0820100	Bathroom accessories, tumbler holder, soap, tumbler & toothbrush		each			
Specialties Total						
12	Furnishings					
I2493200	Drapery hardware, tray & curtain rod, adjustable, 30" to 48"		each			
Furnishings Total						
15	Mechanical					
I5410300	Faucet, hot & cold water identificatin buttons, replace		each			
I5410300	Faucet, aerator, replace/clean		each			
I5410300	Faucet, supply lines, replace		each			
I5410300	P-Trap, 1 1/4"/1 1/2" replace		each			
I5410300	P trap, repair leak		each			
I5410300	Vanity, replace,cabinet,top,faucet, supply lines & trap		each			
I5410300	Faucets stem, room repair		each			
I5410300	Faucet, repair, deep sink		each			
I5410300	Faucet, replace, deep sink		each			
I5410300	Faucet, replace, room		each			
I5410300	Faucet, pop, remove/repair		each			
I5418450	Lavatories, W/trim, vanity top, cultured marb, 37" x 22", sgl bowl		each			
I5418500	Shower head, replace		each			
I5418500	eschutcheon, at shower head, replace		each			
I5418500	Eschutcheon, shower valve, secure		each			
I5418500	Shower head, remove institutional style, install pipe & new shower head		each			
I5418500	Valve, shower valve, remove/repair/replace stem		each			
I5830100	Fan ,exhaust, repair, rattle noise		each			
I5850500	grille, ac return filter grille, install		each			
I5850500	Panel, AC access, secure		each			
Mechanical Total						
16	Electrical					
I6139700	Detector, smoke, secure		each			
I6139700	Detector, smoke, interior room, replace		each			
I6139700	Detector, smoke, replace battery		each			
I6140910	Switch, single pole,/light		each			
I6140910	Switch, push button,fluor light		each			
I6140910	Switch, double/light		each			
I6140910	Recepticle, replace		each			
I6140910	Recepticle, secure recepticle & cover		each			



CSI	Item Description for HQ 101	Takeoff Qty	Unit	Mat Total	Subs Total	ACTUAL QU
I6140910	GFI, replace		each			
I6140910	Cover, recep/gfi/switch, replace		each			
I6510440	Fixture, interior, 3ft fluor, replace		each			
I6510440	Fixture, interior, 2 ft fluor, replace		each			
I6510440	Ballast, replace 2,3, &4 ft florescent light		each			
I6510440	Fixture, exterior, harris light, remov.exis&instal new.		each			
I6510440	Lens, cover, harris light, head/replace		each			
I6510440	Lens, fluorescent, 3ft, replace		each			
I6510440	Lens, fluorescent, 2 ft,replace		each			
I6510440	Lens, fluorescent, 4ft replace		each			
I6510440	Ballast, replace/ interior fluorescent fixture		each			
I6530320	Exit light, repair		each			
I6530320	Exit light clg or wall mount, L.E.D. battery unit, single face		each			
I6530320	Emergency light, repair		each			
I6530320	Fan, exhaust, replace cover		each			
I6530320	Fan, exhaust/room, replace		each			
I6530320	Emer lt units,btry operated,twin sealed bm lt,25 W,6 V ea,lead btry		each			
I6585600	Lamps, "U" tubes, lounge		each			
I6585600	Lamps, incadescent		each			
I6585600	Lamps, 7 watt for harris fixture head/exterior security		each			
I6585600	Lamps, fluor, exterior, security, 7watt		each			
I6585600	Lamps, fluorescent, 2 ft, replace		each			
I6585600	Lamps, fluroescent, 4 ft, replace		each			
I6585600	Lamps, fluorescent, 3ft, replace		each			
I6585600	Lamps, 4 & 8' located on 10ft+ceilings		each			
I6585600	Lamps, incadescent, red/night lights.		each			
Electrical Total						
07	Conveying					
I2101950	H) clean and adjust proximity devices on door.		each			
Conveying Total						
08	Mechanical					
I8110900	Door saver, instal,		each			
I8110900	Closure, door, remove		each			
I8110900	Door hardwar, replace		each			
I8110900	Sink, secure & caulk		each			
I8110900	Closure, door, repair		each			
I8110900	Install new hinge		sets			
I8110900	Vanity/caulk, repair formica		each			
I8110900	Lockset, bathroom, replace		each			
I8110900	Lock, Window repair/replace		each			
I8720300	Install weatherstripping		opng			
I8720300	Weather stripping, secure existin.		opng			
I8720300	Weather stripping, secure existin.		opng			
Mechanical Total						
09	(Unassigned)					
I9310100	Install new tiles		sqft			
I9310100	Tile, ceramic, replace		sqft			

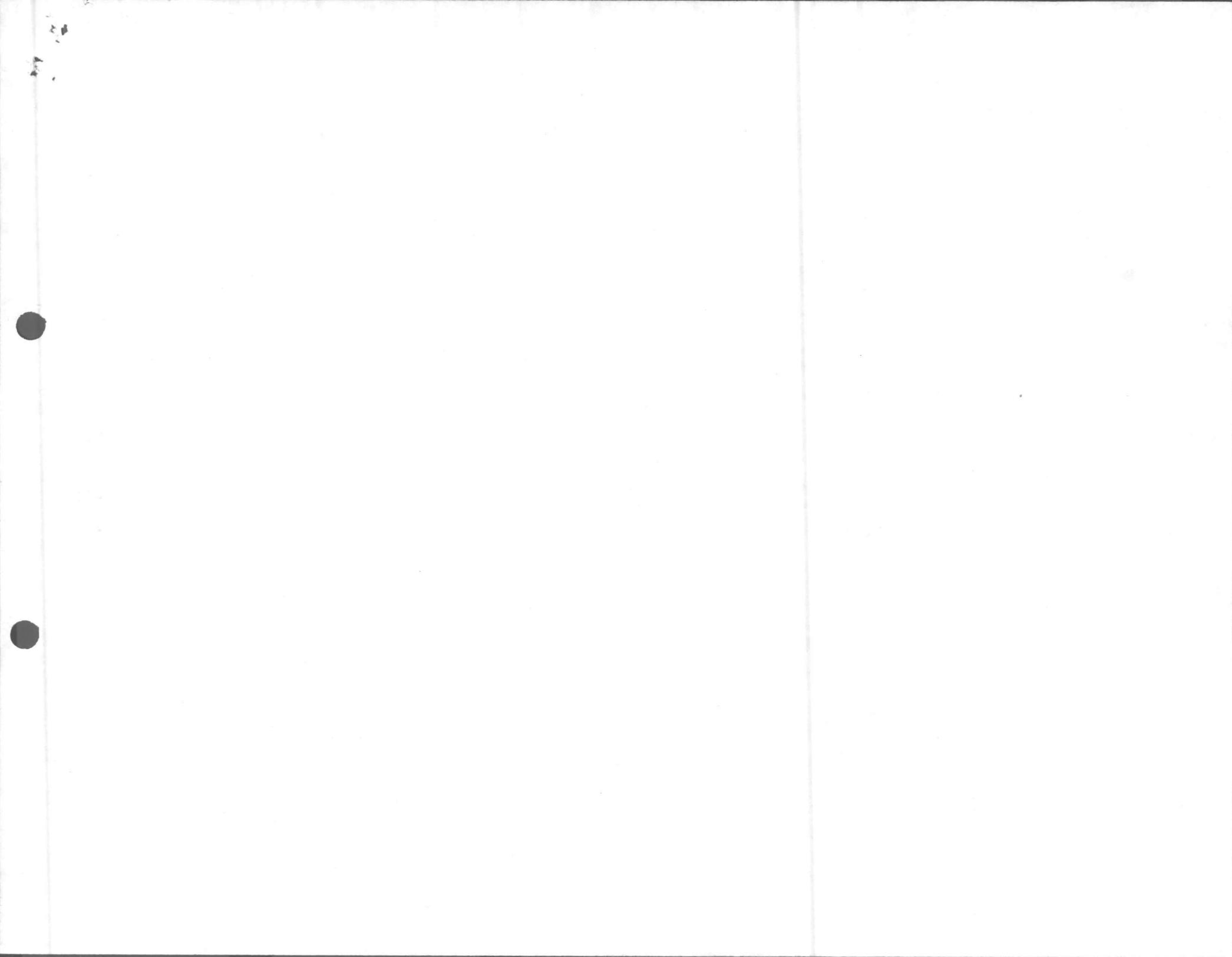


CSI	Item Description for HQ 101	Takeoff Qty	Unit	Mat Total	Subs Total	ACTUAL QU
09310100	Ceiling, repair, paster/sheetrock		sqft			
	(Unassigned) Total					
15	(Unassigned)					
I5410100	Valve, toilet, rebuild to repair leak/spud/flush vlv		each			
I5410100	Valve, toilet, replace spud & vacuum breaker		each			
I5410100	Valve, toilet, replace handle repair kit, toilet wont flush		each			
I5410100	Drain, sink,repair leak		each			
I5410100	Drain, shower, unclog		each			
I5410100	Drain, sink, unclog		each			
I5410100	Valve, toilet, adjust water, long/short flush		each			
I5410100	Valve, shower, rebuild/replace		each			
I5410100	Valve, urinal rebuild		each			
I5410100	Flexer, toilet flush vlv, replace		each			
I5410100	Valve, urinal flush, replace		each			
I5418400	Sink (to 23" x 18", single)		each			
I5418400	Vanity, replace cabin.,top,faucet,supply lines,trap		each			
	(Unassigned) Total					
	Grand Total		item			



Percent	Amount	Category for HQ-101	Hours	Job Cost Phase
100.00 %	2,702	Labor	96.0	
		Material		
		Subcontractor		
		Equipment		
		Other		
		User		
	2,702	Net Costs Subtotal		
	2,702	Total Estimate	\$0.00/item	

35



BASE MAINTENANCE JOB ORDER

FY 01	AG/SAG	REQ. CODE		REQUEST # PM# 020A-01		DIST. DATE - BY 3-27-01		FACILITY # HP-301	
AAC M67001	FA 23	WC	FC	OC/SOC	CAC	BRC	JN/LU EBGO	RON	RBC
WGC	TYPE OF WORK REPAIR		PROJECT #		SKETCH	PLAN	SPECIAL INSTRUCTIONS CYCLIC MAINTENANCE		

FOR FURTHER INFORMATION CONTACT: JOHN YANKOSKY 451-0877 TICKET # 01-20939

GENERAL JOB DESCRIPTION: MISC. STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS

FOR ENTRY INTO BUILDING CONTACT : GYSGT PITCHFORD 451-5155

START DATE: 5/7/01 NEED MATERIAL BY: 4/30/01

START DATE: 30 April COMPLETE BY: 6/6/01 COMPLETION DATE: 6-8-01

PHASE SEQUENCE			SUMMARY OF ESTIMATES					
PHASE NO.	WORK CTR	EST HRS	SHEET NO.	WORK CTR	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
1	41CG	32		41CG	32	920	899	1819
TOTALS					32	920	899	\$1,819.00

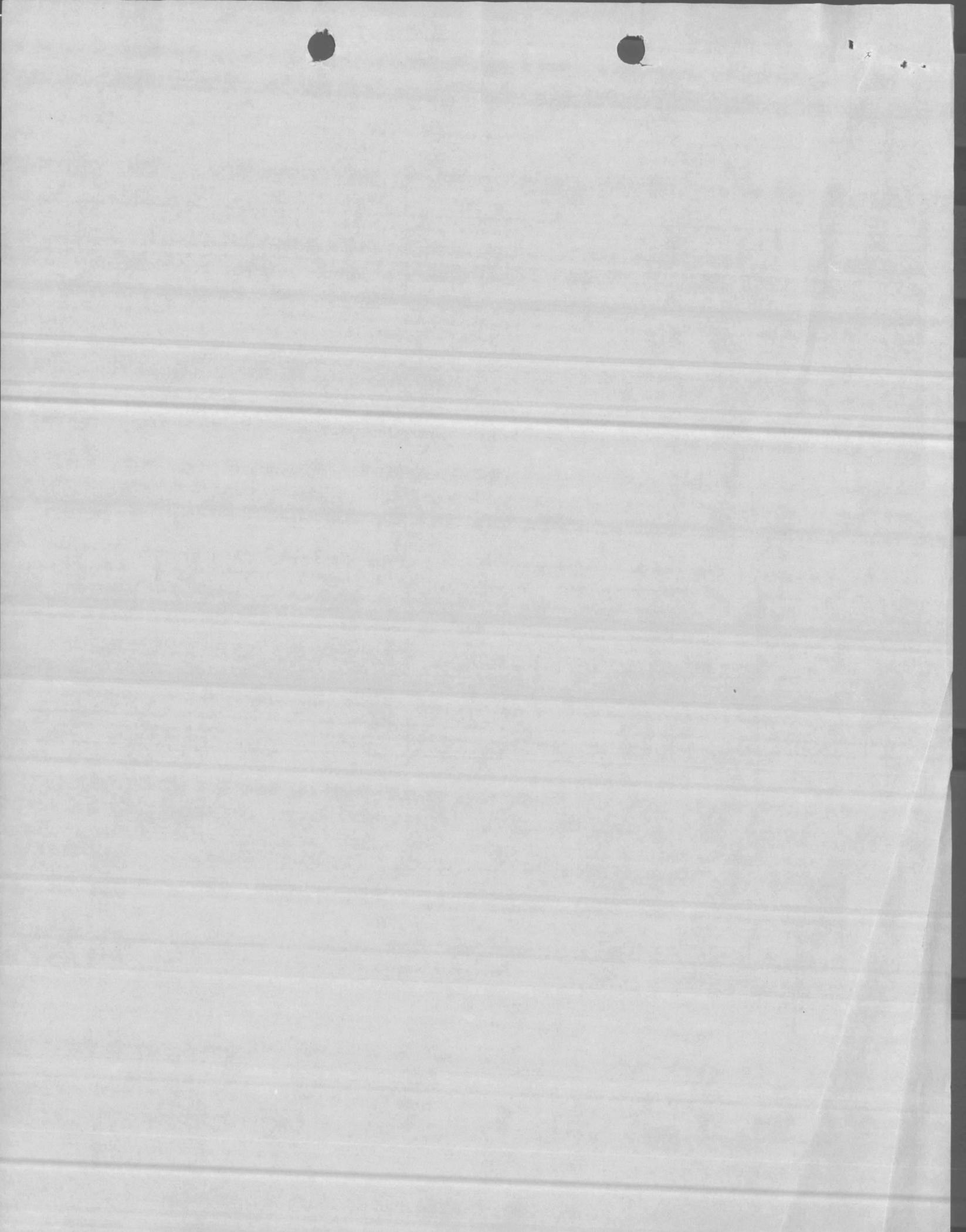
CONTINUED ON SH_0_ THRU_0_

PREPARED BY: JOHN YANKOSKY DATE: 03/21/01

REVIEWED BY:

AUTHORIZED BY: *[Signature]* DATE: 23 Mar 01

SHEET 1 OF 36



*** PHASE DESCRIPTIONS ***

JOB/IFS	WORK CENTER	CRAFT NAME	BLDG/ FACILITY	EST HOURS
1 1/1	41CG	COMPANY CONCEPT CARPENTER	P-301	0
MISC STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS.				

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

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

2



JOB NUMBER: HP 301 CRAFT PHASE NO: 1 JOB PHASE NO: 1 P&E: JDY
 BUILDING / FACILITY: HP-301 ZONE: 2 CREW SIZE: 2
 WORK CENTER: 41CG COMPANY CONCEPT CARPENTER LABOR RATE: A
 HAZARDOUS WORKING CONDITIONS: NO CREW RETURNS FOR LUNCH: YES
 PHASE COSTS: LABOR: MATERIAL COST: 899 EQUIPMENT COST:
 DEPRECIATION COSTS: TOTAL: 899
 CONTRACT (Y/N): NO IFS PHASE NO.: 1

*** PHASE DESCRIPTION ***

MISC STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS.

*** THERE ARE NO TASKS IN THIS PHASE ***

*** JOB PHASE SUMMARY ***

CRAFT TIME	0.0
TOTAL EPS TIME	0.0
TOTAL NON-EPS TIME	0.0
TOTAL PHASE TIME	0.0

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

(3)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

(1)

MCN-NSN: 4510-00-202-73660	UNIT OF ISSUE: EA	SOURCE OF SUPPLY:
QUANTITY: 3	UNIT COST: 3.00	TOTAL COST: 9.00
LOCATION:		
DESCRIPTION: LEVER ASS'Y, WAT/CLO		

SOS TOTAL COST: \$9.00

*** CONTINUED ON PAGE 2 ***

(1)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

②

MCN-NSN: 6350-01-C00-17740	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: LD
QUANTITY: 5	UNIT COST: 9.75	TOTAL COST: 48.75
LOCATION:		

DESCRIPTION: SMOKE DETECTOR, 9V BATTERY BACKUP, BAT. INCLUDED
NOW CARRIED IN WARE HOUSE. SAME AS 4210-86-RAC-BATT
S/S IF WAREHOUSE IS OUT IS MADDUX 1-800-849-5506, LISA
MADDUX PART # 86 RAC.

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SOS TOTAL COST: \$48.75

*** CONTINUED ON PAGE 3 ***

⑤



WORK REQUEST NUMBER: HP 301
 ACCOUNT CODE NUMBER: B048
 PREPARED BY: JOHN YANKOSKY
 JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
 DATE CREATED: 01/03/20
 DELIVERY DATE: 01/04/30
 DELIVER MATERIALS TO: 41CG

③

MCN-NSN: 5340-3J-944-VIEWO	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: BPA
QUANTITY: 5	UNIT COST: 3.89	TOTAL COST: 19.45
LOCATION:		
DESCRIPTION: VIEWER, DOOR, WIDE ANGLE, GRAINGER P/N 3J944		
S/S GRAINGER		
505 COVIL AVE.		
WILMINGTON, NC.		
1-910-762-3088		

④

MCN-NSN: 6210-RB-792-RLM00	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: BPA
QUANTITY: 2	UNIT COST: 32.00	TOTAL COST: 64.00
LOCATION:		
DESCRIPTION: LENS, P/N RB 79-2		
S/S CRAVEN ELECTRIC		
JACKSONVILLE, NC.		
353-4643		
MAKE SURE END CAPS ARE CLEAR PLASTIC.		
WE RECEIVED SOME WITH WHITE PLASTIC END CAPS		
AND THEY ARE ABOUT 1/8" TO LONG		
OVERALL LENGTH 25 9/16"		

SOS TOTAL COST: \$83.45

*** CONTINUED ON PAGE 4 ***

⑤



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 4106

⑤

MCN-NSN: 6210-CR-AVF-21050 UNIT OF ISSUE: EA SOURCE OF SUPPLY: CR
QUANTITY: 1 UNIT COST: 34.00 TOTAL COST: 34.00

LOCATION:

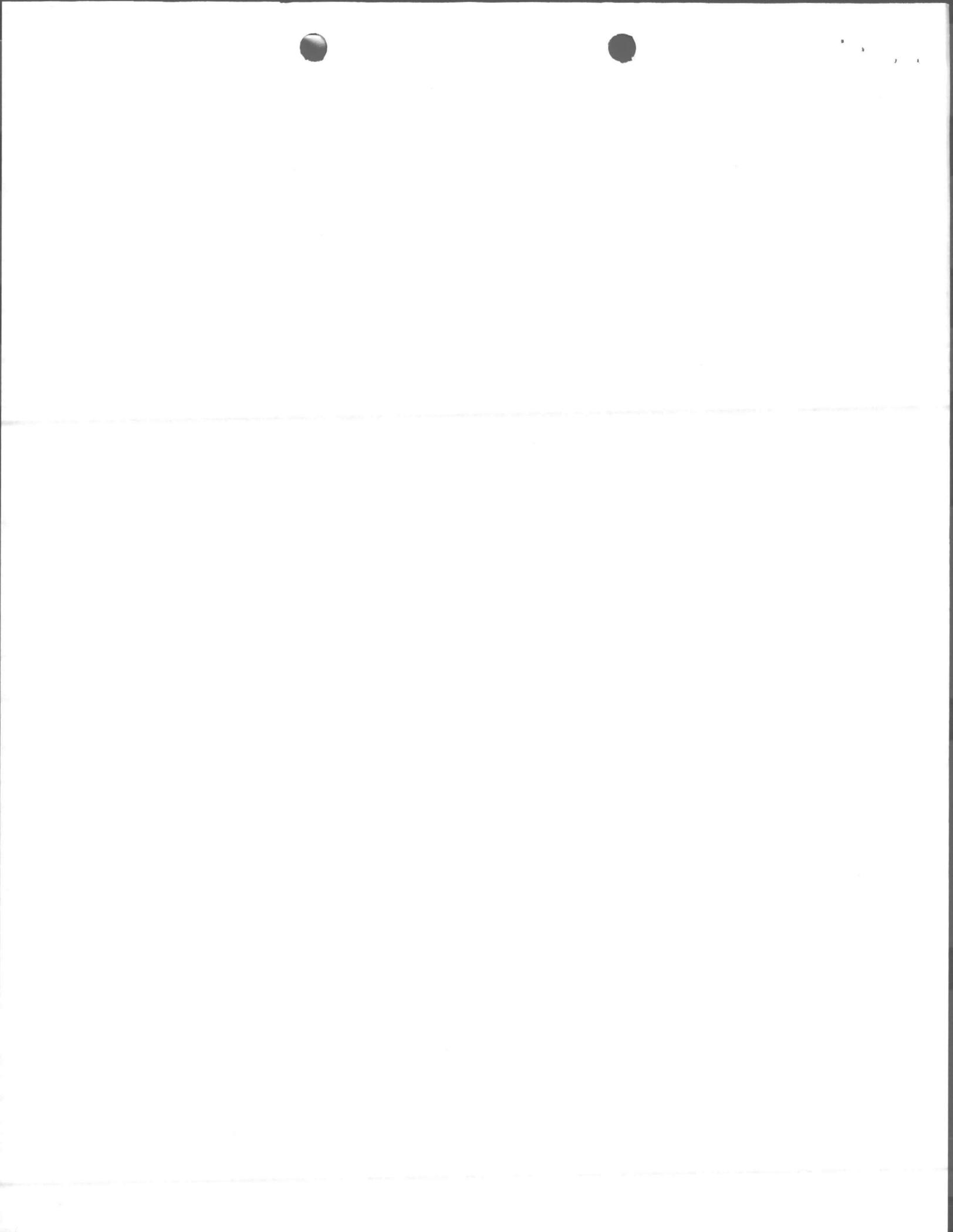
DESCRIPTION: LENS COVER, FLUOR. 4 FT.
CRAVEN PART# F-2105
S/S CRAVEN ELECTRIC, JACKSONVILLE, N.C.
353-4643
USED FOR OFFICE SPACES IN HP-51,53& HP 185PASSAGEWAY

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SOS TOTAL COST: \$34.00

*** CONTINUED ON PAGE 5 ***

①



DATE: 01/03/20

*** FEJE - DETAILED ESTIMATES ***

PAGE: 5

*** BILL OF MATERIALS ***

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 4108

MCN-NSN: 6210-02-FVS-00480
QUANTITY: 1
LOCATION:

UNIT OF ISSUE: EA
UNIT COST: 45.40

SOURCE OF SUPPLY: CRA
TOTAL CDST: 45.40

DESCRIPTION: LENS, 4 FT. VAPOR,
CRAVEN PART# TLM FVS48
ORDERED FOR M-309
S/S CRAVEN ELECTRIC
PH # 353-4643
.
.
.

SOS TOTAL COST: \$45.40

*** CONTINUED ON PAGE 6 ***



WORK REQUEST NUMBER: HP 301
 ACCOUNT CODE NUMBER: B048
 PREPARED BY: JOHN YANKOSKY
 JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
 DATE CREATED: 01/03/20
 DELIVERY DATE: 01/04/30
 DELIVER MATERIALS TO: 41CG

(7)

MCN-NSN: 4510-00-116-31520 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 3 UNIT COST: 1.98 TOTAL COST: 5.94
 LOCATION:
 DESCRIPTION: FLUSH CONTROL UNIT, FLAPPER BALL W/CHAIN, RUBBER MATERIAL,
 DO NOT SUB. P/N 54BP (KORKY) LAVELLE IND.

(8)

MCN-NSN: 4510-00-202-68600 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 2 UNIT COST: 8.95 TOTAL COST: 17.90
 LOCATION:
 DESCRIPTION: SEAT, TOILET WITH COVER FOR FC-530
 S/S WAREHOUSE

(9)

MCN-NSN: 4510-00-484-74100 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 20 UNIT COST: 4.64 TOTAL COST: 92.80
 LOCATION:
 DESCRIPTION: BAR, TOWEL, 18" LONG X 7/8" SQUARE.

(10)

MCN-NSN: 4510-01-200-65030 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 20 UNIT COST: 1.69 TOTAL COST: 33.80
 LOCATION:
 DESCRIPTION: HOLDER, TOILET TISSUE ROLLED, SPRING LOADED, TO FIT BETWEEN
 2 FIXED POINTS. ROLLER

(11)

MCN-NSN: 4510-01-000-06710 UNIT OF ISSUE: PR SOURCE OF SUPPLY: LOC
 QUANTITY: 5 UNIT COST: 4.90 TOTAL COST: 24.50
 LOCATION:
 DESCRIPTION: HOLDER, TOILET TISSUE, CHROME, P/N 632 SEACHROME.

(6)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 41CG

(12)

MCN-NSN: 5935-01-012-30800 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 20 UNIT COST: 1.87 TOTAL COST: 37.40
LOCATION:
DESCRIPTION: RECEPTACLE, DUPLEX.

(13)

MCN-NSN: 5975-00-682-05590 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 20 UNIT COST: .59 TOTAL COST: 11.80
LOCATION:
DESCRIPTION: PLATE,WALL, ELEC, 1 GANG, OUTLET TYPE, STAINLESS
STEEL, SATIN FINISH, P/N 97101 (BRYANT)

SOS TOTAL COST: \$224.14

*** CONTINUED ON PAGE 8 ***

(14)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 4106

(14)

MCN-NSN: 4510-P1-050-51000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 15 UNIT COST: 12.03 TOTAL COST: 180.45
LOCATION:
DESCRIPTION: SHOWER HEAD, NEW TYPE FOR HP-51, WITH RUBBER INSERT HEADS
S/S PALMETTO, 1-800-830-0426
PART # P105-051

(15)

MCN-NSN: 4510-P0-24--20100 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 8 UNIT COST: 7.82 TOTAL COST: 62.56
DESCRIPTION: HANDLE FOR FAUCET FOR HP-301
S/S PALMETTO, 1-800-830-0426
PART # P024-201

(16)

MCN-NSN: 4510-P0-99--24500 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 14 UNIT COST: 7.13 TOTAL COST: 99.82
DESCRIPTION: FAUCET STEM FOR HP-301
S/S PALMETTO, 1-800-830-0426
PART # P099-245 HOT & COLD

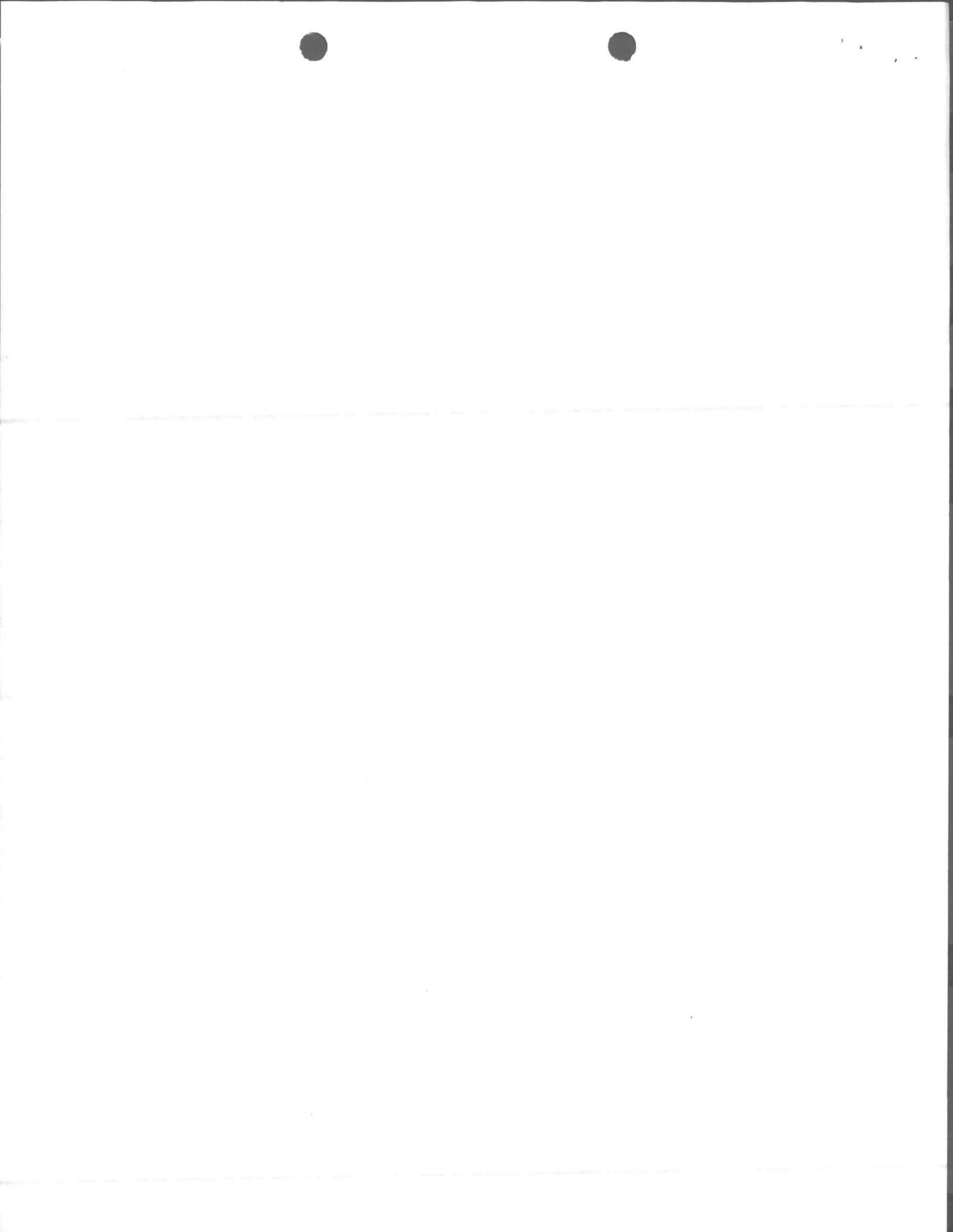
(17)

MCN-NSN: 4510-RP-607-90000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 1 UNIT COST: 7.16 TOTAL COST: 7.16
DESCRIPTION: BONNET FOR DELETA SHOWER VALVE HP-301
S/S PALMETTO, 1-800-830-0426
PART # RP60790

(18)

MCN-NSN: 4510-RP-611-70000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 2 UNIT COST: 22.95 TOTAL COST: 45.90
DESCRIPTION: HANDLE FOR DELTA SHOWER VALVE HP-301
S/S PALMETTO, 1-800-830-0426
PART # RP6117

(19)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 4106

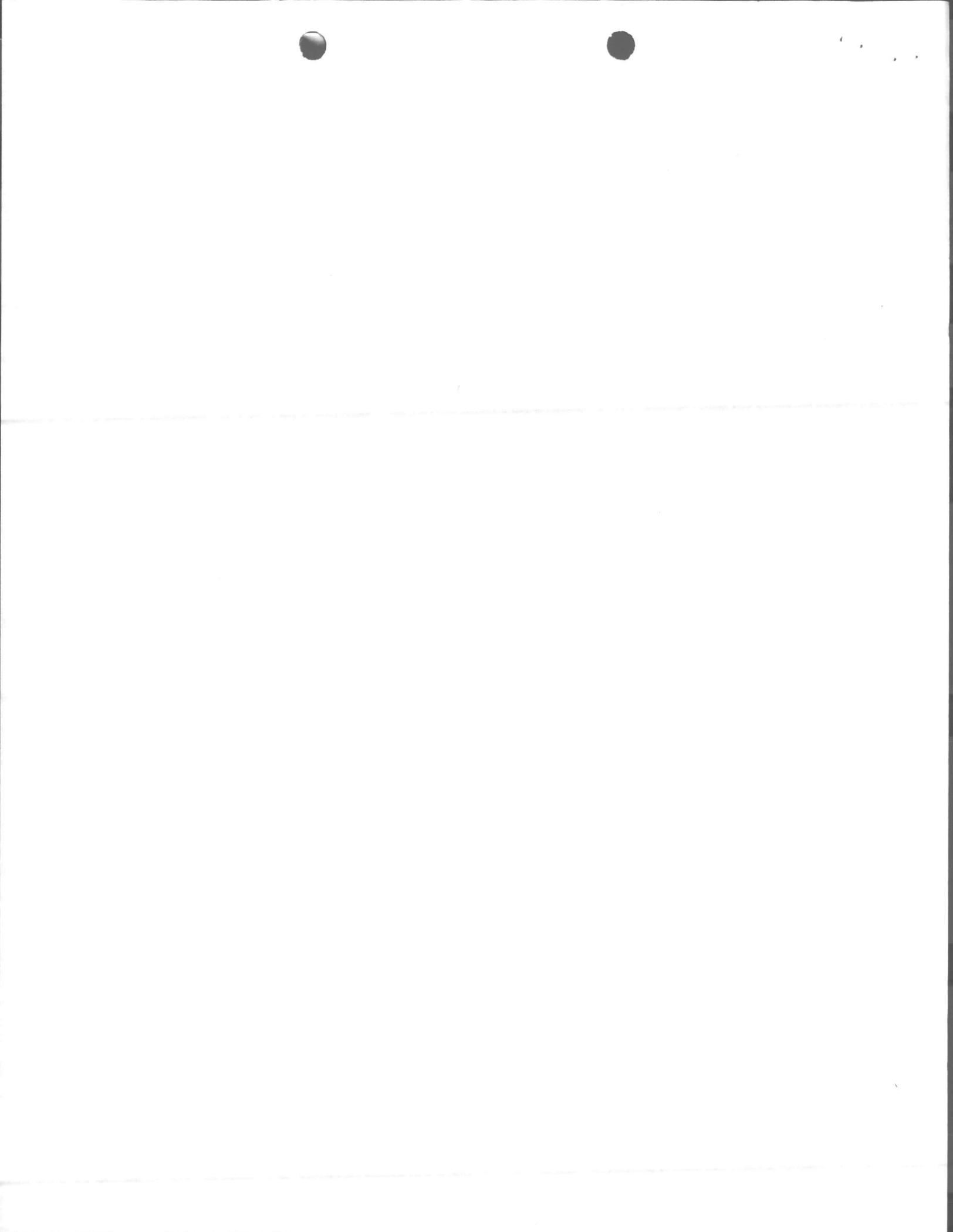
(19)

MCN-NSN: 4510-RP-757-70000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 1 UNIT COST: 23.98 TOTAL COST: 23.98
DESCRIPTION: ESCHUTCHEION FOR DELTA, HP-301 SHOWER VALVE
S/S PALMETTO, 1-800-830-0426
PART # RP7577
.
.
.

SOS TOTAL COST: \$419.87

*** CONTINUED ON PAGE 10 ***

(12)



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 01/03/20
DELIVERY DATE: 01/04/30
DELIVER MATERIALS TO: 4106

20

MCN-NSN: 4510-PO-99--10900 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PLA
QUANTITY: 2 UNIT COST: 16.95 TOTAL COST: 33.90
DESCRIPTION: SHOWER VALVE CARTRIDGE FOR HP-301
S/S PALMETTO, 1-800-830-0426
PART #PO99-109

SOS TOTAL COST: \$33.90

PHASE TOTAL COST: \$898.51

21

Kevin @ Renee Add
John Yankosky 3/24/01

6210-00-299-7217

GLOBE, GLASS JELLY JAR

QUANTITY @ ea

\$ 2.00

= 12.60

13





CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 2 OF _____

INSPECTION AREAS	ROOM# OFFICE			ROOM# OFFICE			ROOM# OFFICE			ROOM# OFFICE			ROOM# OFFICE		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM# OFFICE			ROOM# 130			ROOM# 132			ROOM# 134			ROOM# 136		
NIGHT LIGHT	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															
									SAT						
									SAT						
									NO SCREENS						EXT. PAINT LOOSE LOCK NO SCREENS

REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM #'S PAINT PEELING/MOLD
ROOM #'S WALL LOCKER NEEDS REPAIR



CYCLIC MAINTENANCE

AREA & FACILITY: JHP-301

INSPECTOR _____

SHEET # 3 OF _____

INSPECTION AREAS	ROOM# <u>135</u>			ROOM# <u>133</u>			ROOM# <u>131</u>			ROOM# <u>OFFICE</u>			ROOM# <u>OFFICE</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
<u>SINK</u>						<u>✓ CRACKED</u>									
<u>Wall locker</u>	<u>✓</u>		<u>locking mech.</u>												
INSPECTIO AREAS:	ROOM# <u>OFFICE</u>			ROOM# <u>OFFICE</u>			ROOM# <u>OFFICE</u>			ROOM# <u>OFFICE</u>			ROOM# <u>OFFICE</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

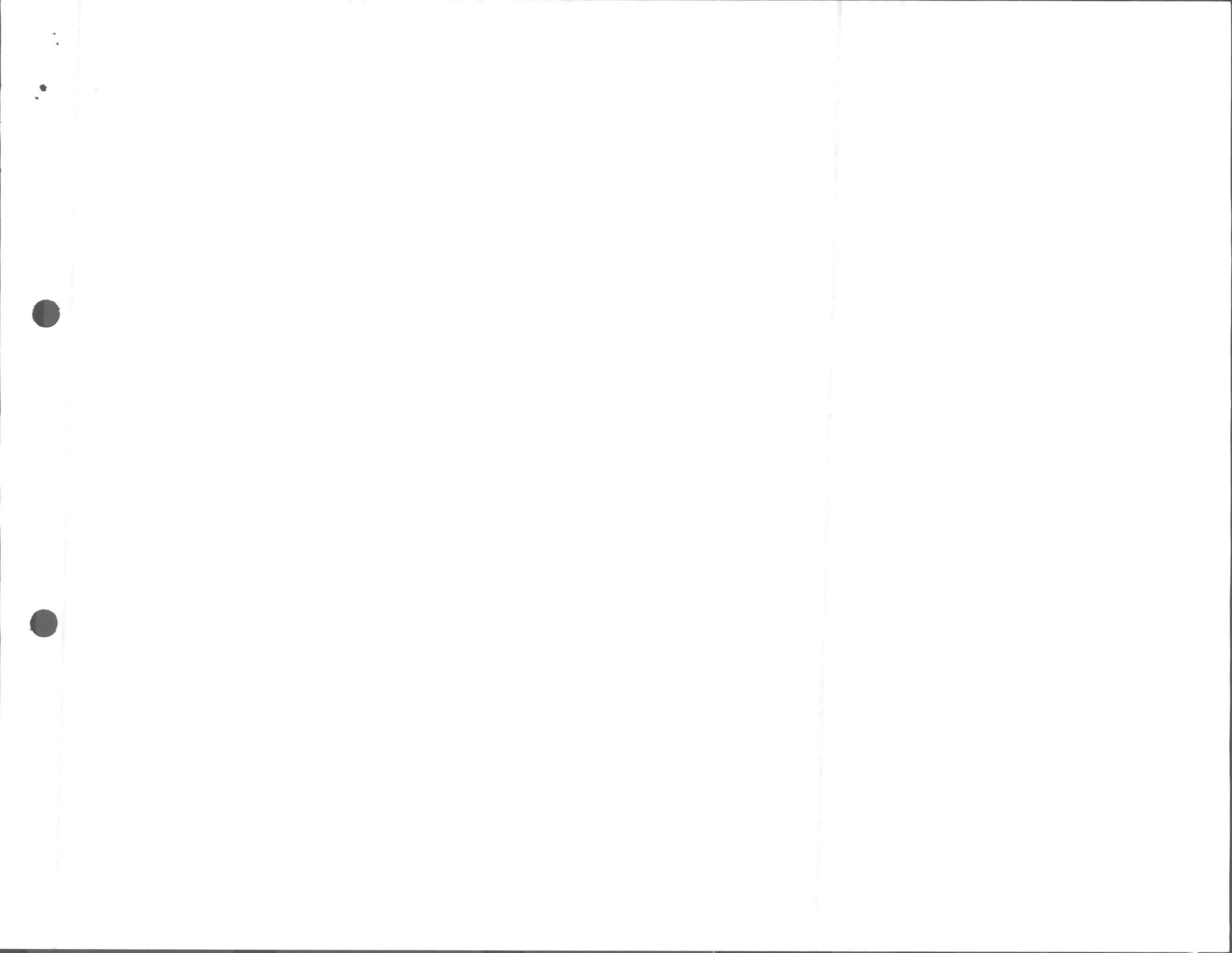
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 16



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 4 OF _____

INSPECTION AREAS	ROOM # 6 OFFICE			ROOM # OFFICE			ROOM # 6 OFFICE			ROOM # 105			ROOM # 103		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET	✓		leaking										✓		leaking
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
Electrical sockets	✓		No power left side							✓		# socket No power right side	✓		No power left side
INSPECTIO AREAS:	ROOM # 101			ROOM #			ROOM #			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT	✓		doesn't turn on												
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															
Wall lockers	✓		locking mechanism												

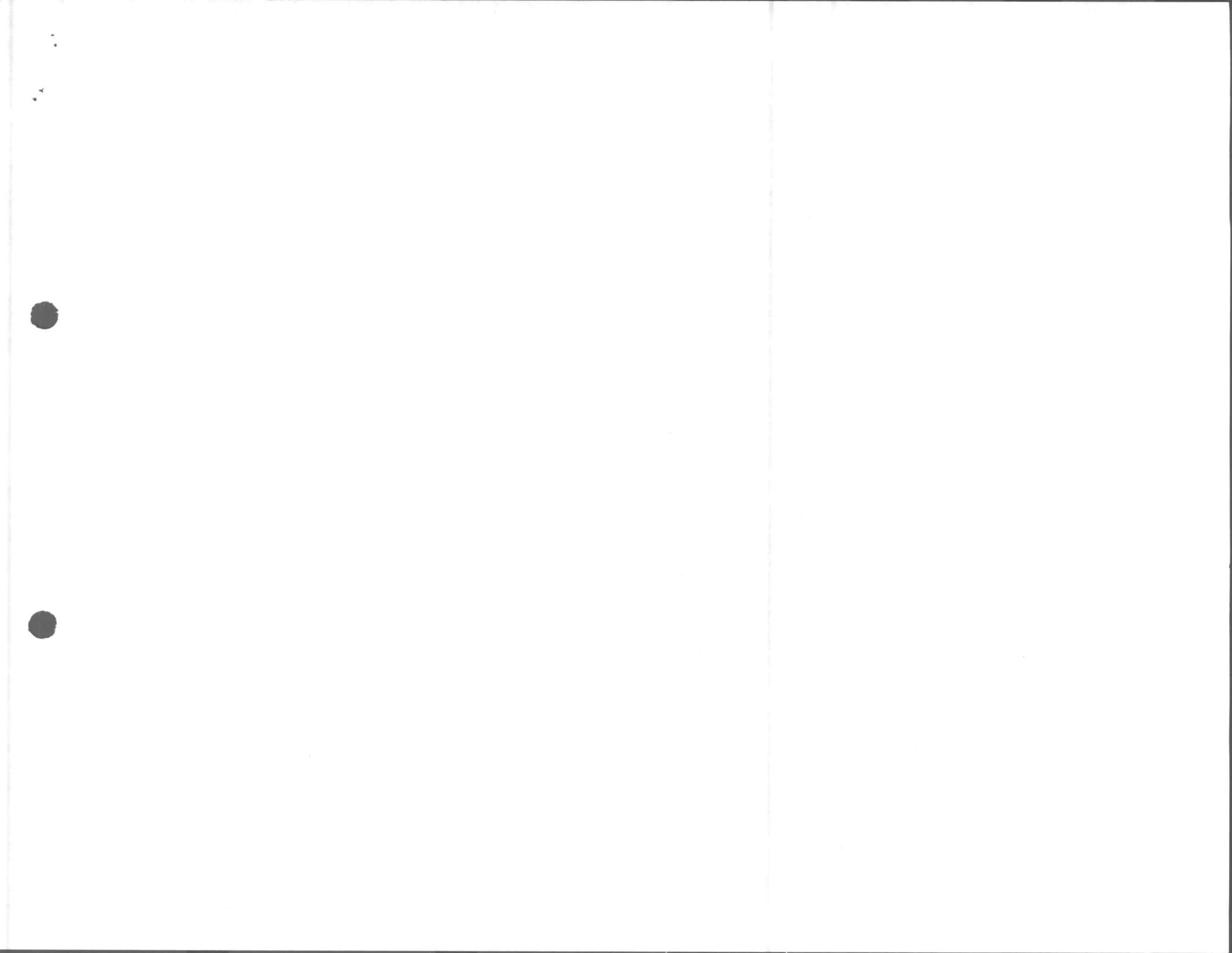
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

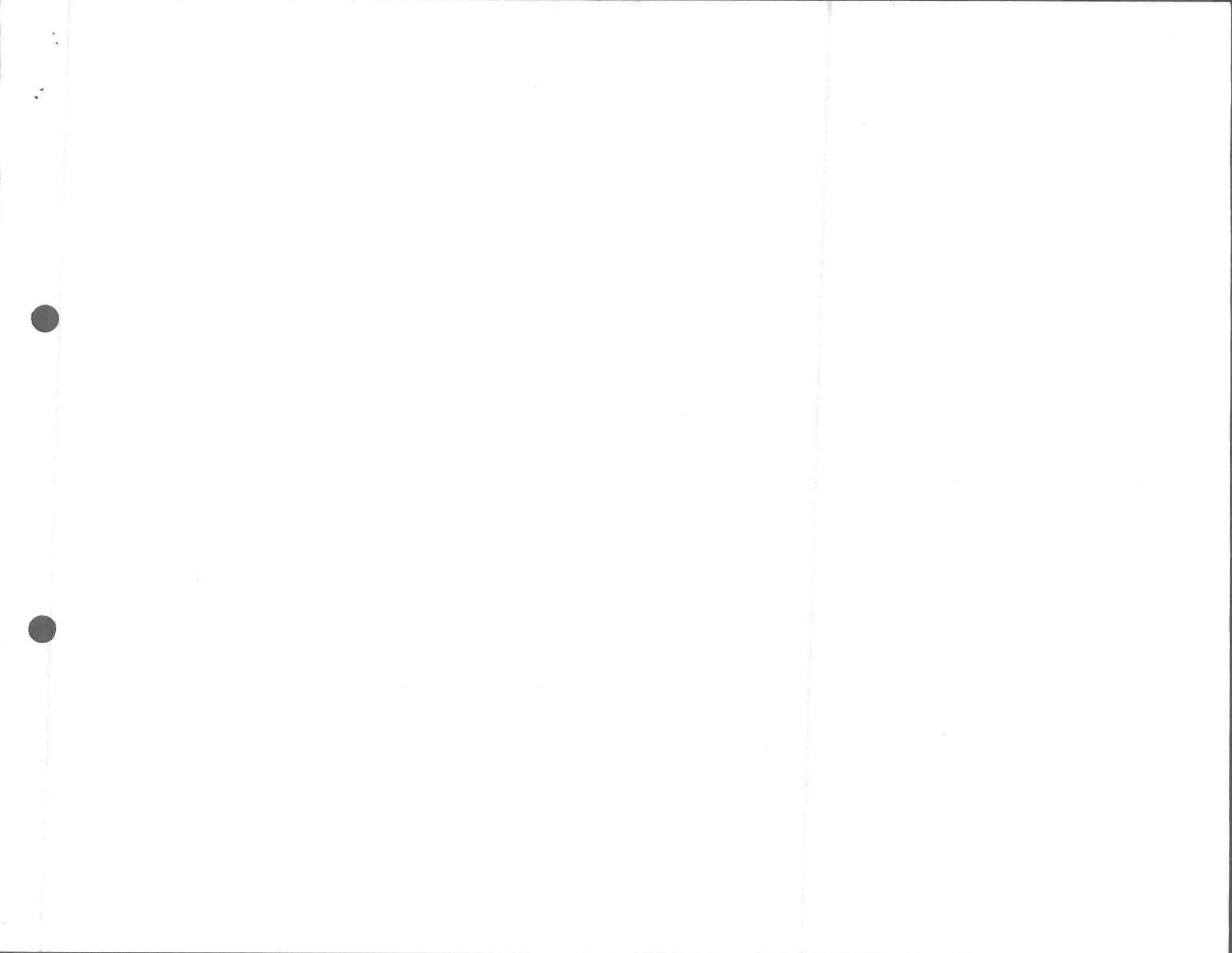
ROOM #'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 17







CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 7 OF _____

INSPECTION AREAS	ROOM # <u>231</u>			ROOM # <u>227</u>			ROOM # <u>225</u>			ROOM # <u>223</u>			ROOM # <u>221</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET	✓		toilet running												
TOILET PAPER HOLD.															
SHOWER HEAD															
Door	✓		lock sticks												
Window CARD										✓		Don't have one			
Window										✓		Broken			
INSPECTIO AREAS:	ROOM # <u>219</u>			ROOM # <u>217</u>			ROOM # <u>215</u>			ROOM # <u>213</u>			ROOM # <u>211</u>		
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET							✓		lose faucet						
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															
Door							✓		lock sticks						

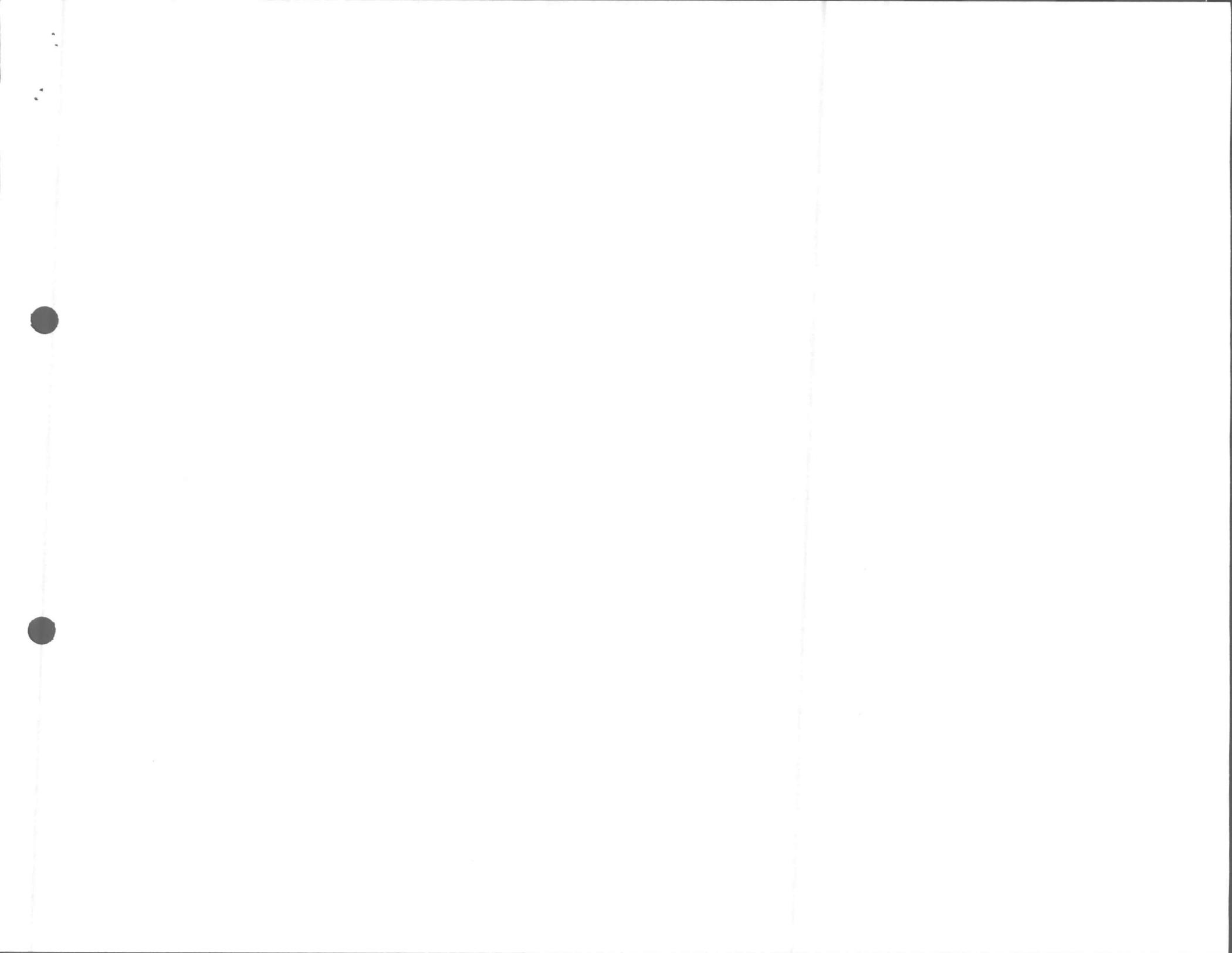
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 20



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 8 OF _____

INSPECTION AREAS	ROOM # <u>209</u>			ROOM # <u>205</u>			ROOM # <u>203</u>			ROOM # <u>201</u>			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
<u>SINK</u>				<input checked="" type="checkbox"/>		<u>cracked</u>									
INSPECTIO AREAS:	ROOM #			ROOM #			ROOM #			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

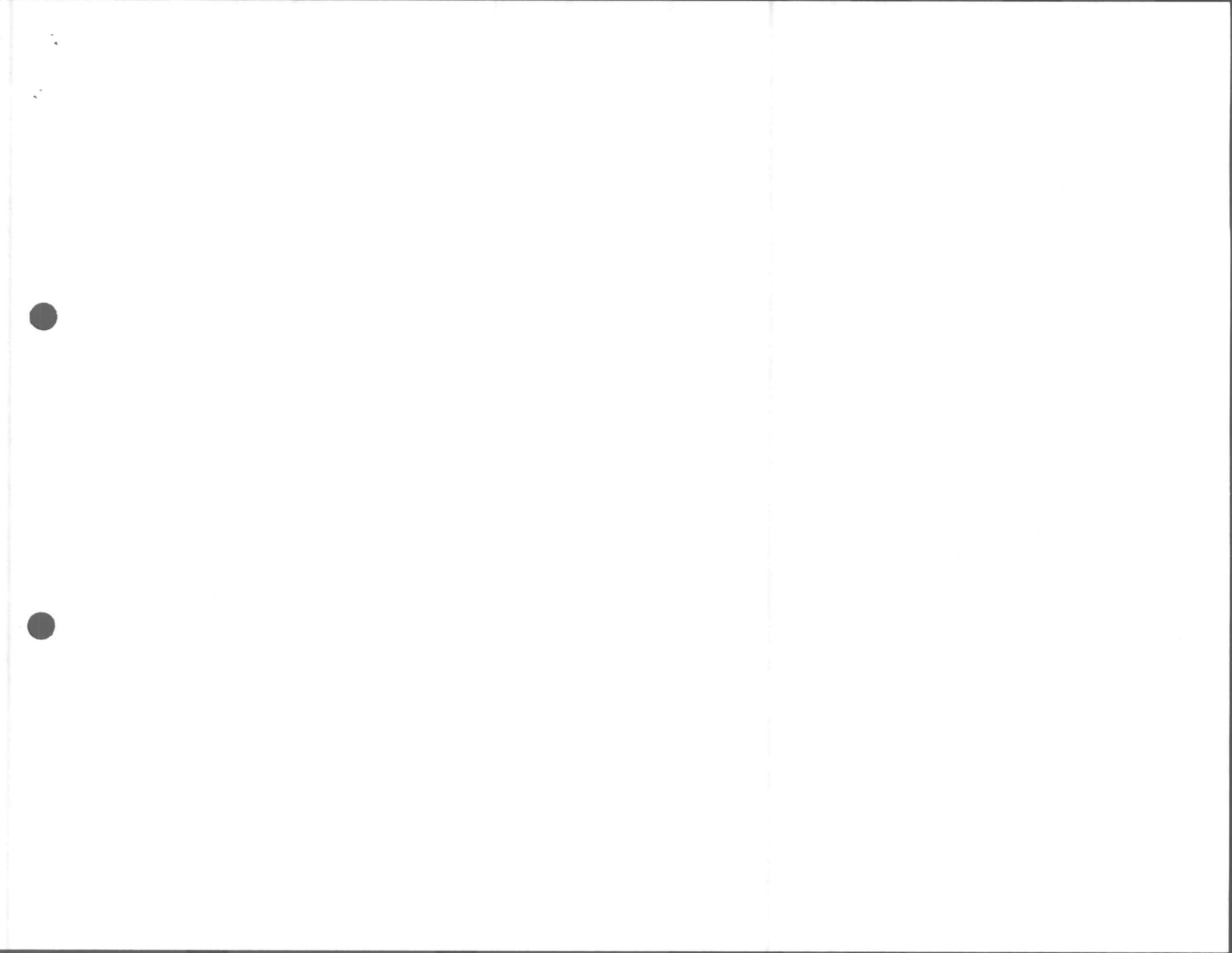
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD

ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 21



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 9 OF _____

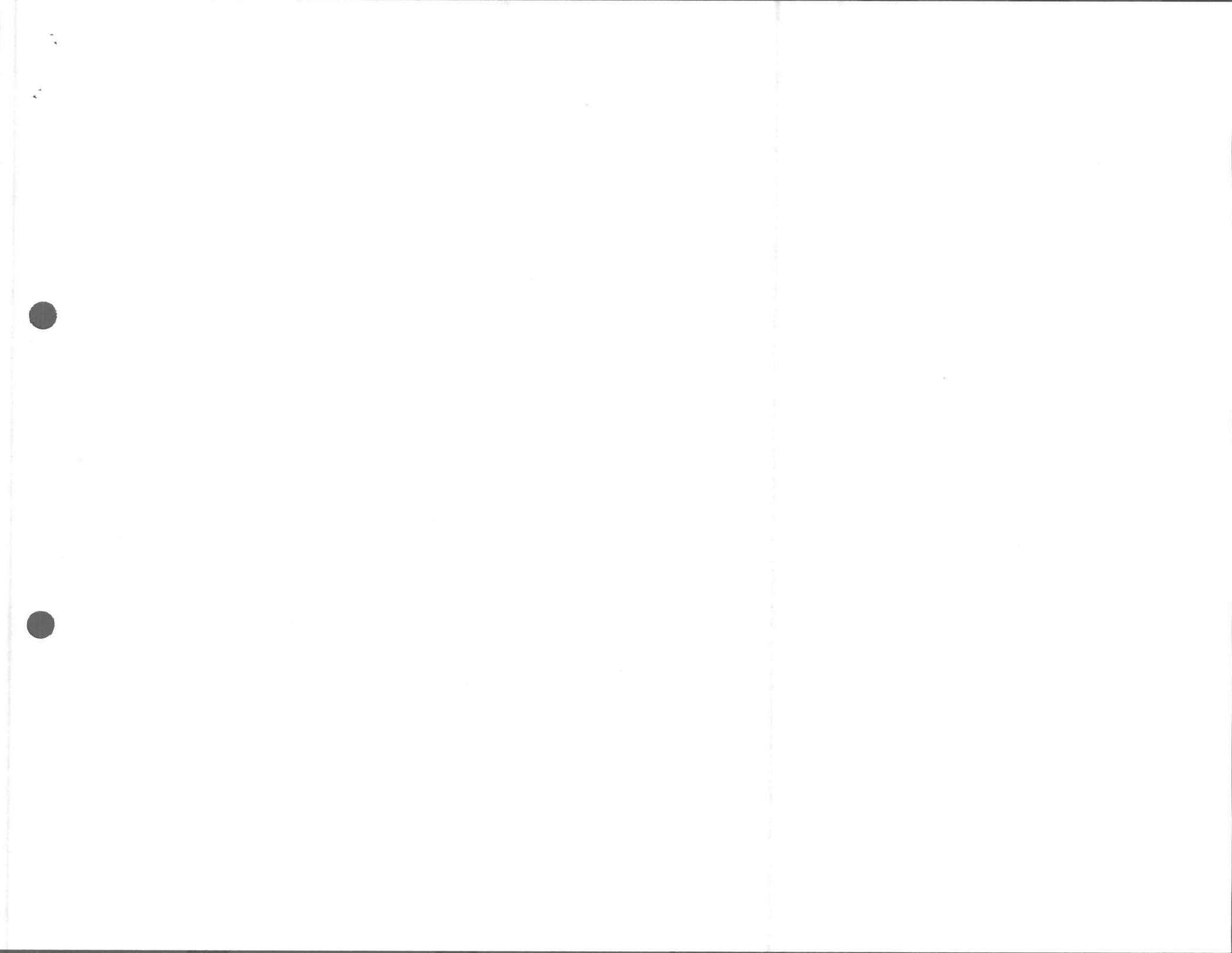
INSPECTION AREAS	ROOM # <u>302</u>			ROOM # <u>304</u>			ROOM # <u>306</u>			ROOM # <u>308</u>			ROOM # <u>312</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>314</u>			ROOM # <u>316</u>			ROOM # <u>318</u>			ROOM # <u>320</u>			ROOM # <u>322</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD					✓	dripping									

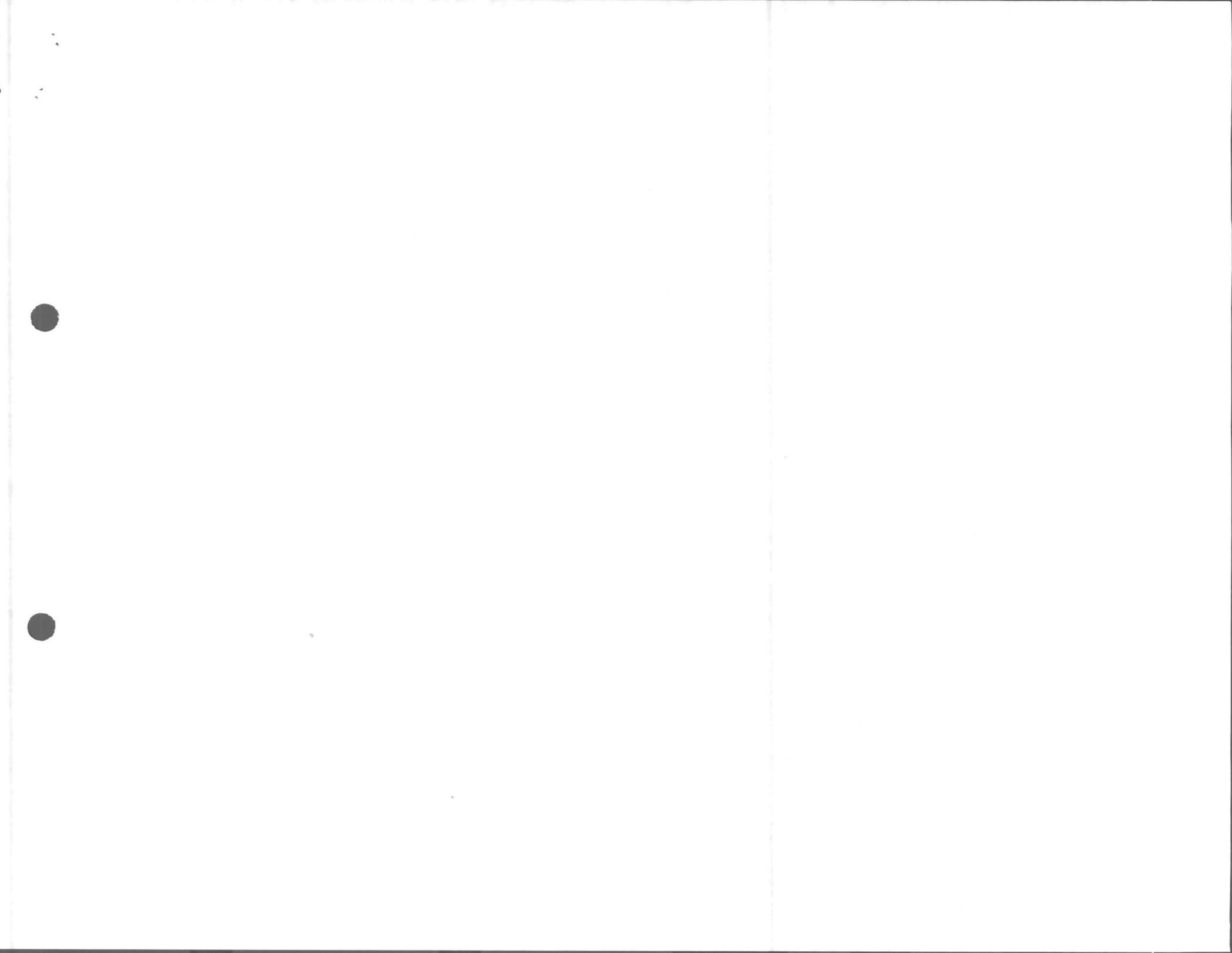
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD
ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 22





CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 11 OF _____

INSPECTION AREAS	ROOM # <u>327</u>			ROOM # <u>325</u>			ROOM # <u>323</u>			ROOM # <u>321</u>			ROOM # <u>319</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>317</u>			ROOM # <u>315</u>			ROOM # <u>313</u>			ROOM # <u>311</u>			ROOM # <u>309</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT							✓		doesn't work	✓		doesn't work			
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

Smells of SMOKE

top half of wall locker will not close.

doesn't work

doesn't work

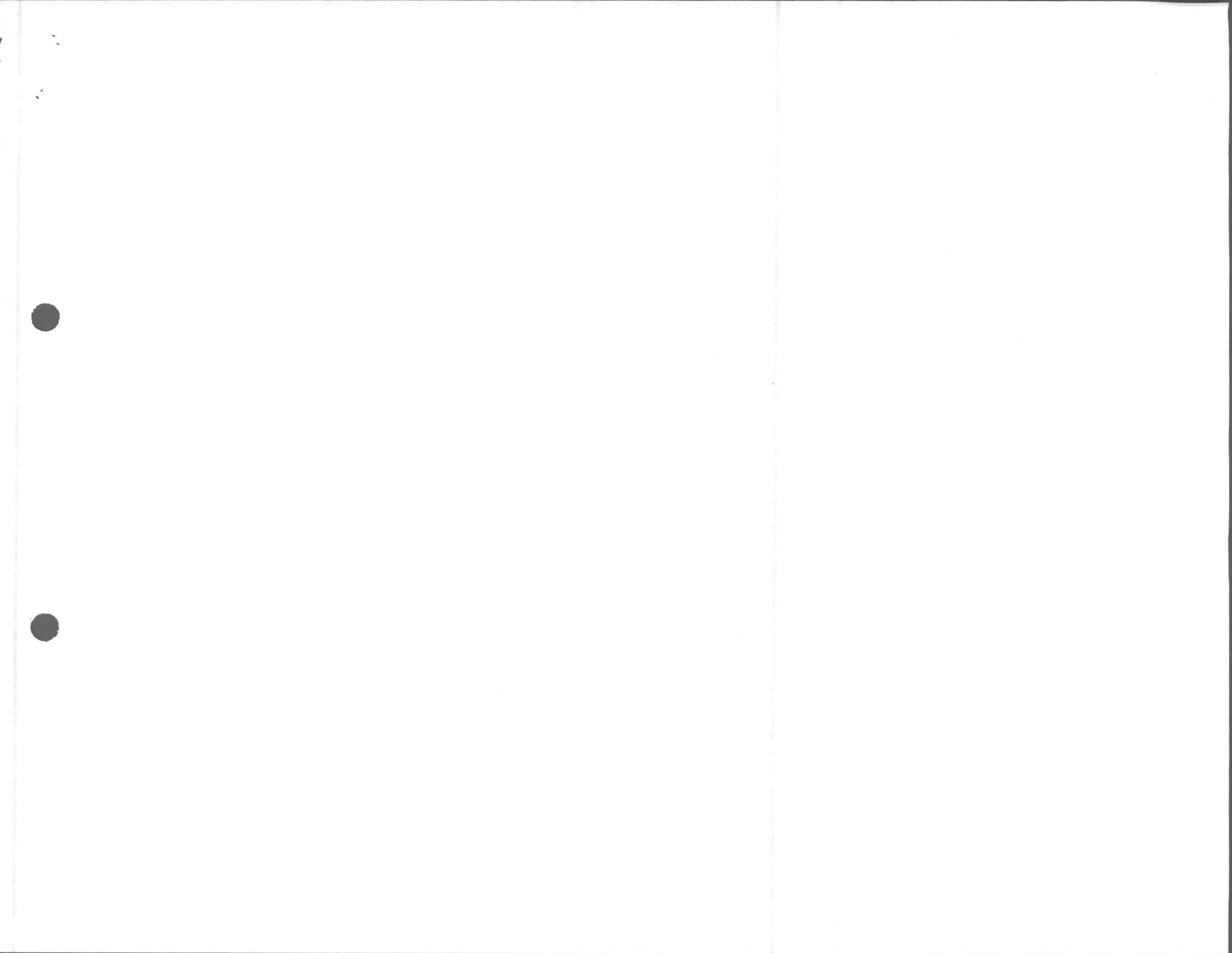
✓ doesn't flush

REMARKS: ROOM #'S AC FAN UNIT NOT WORKING:

ROOM #'S ENTRANCE DOOR LOCK

ROOM#'S PAINT PEELING/MOLD
ROOM #'S WALL LOCKER NEEDS REPAIR

SHT # 24



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR _____

SHEET # 12 OF _____

INSPECTION AREAS	ROOM # <u>305</u>			ROOM # <u>303</u>			ROOM # <u>301</u>			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT	✓		Doesn't work		✓	Doesn't work									
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD							✓		NEED NEW ONE						
SINK				✓		Clogged									
BEER BOTTLES, trash, and food all over floor!															
INSPECTIO AREAS:	ROOM #			ROOM #			ROOM #			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLDER															
SHOWER HEAD															

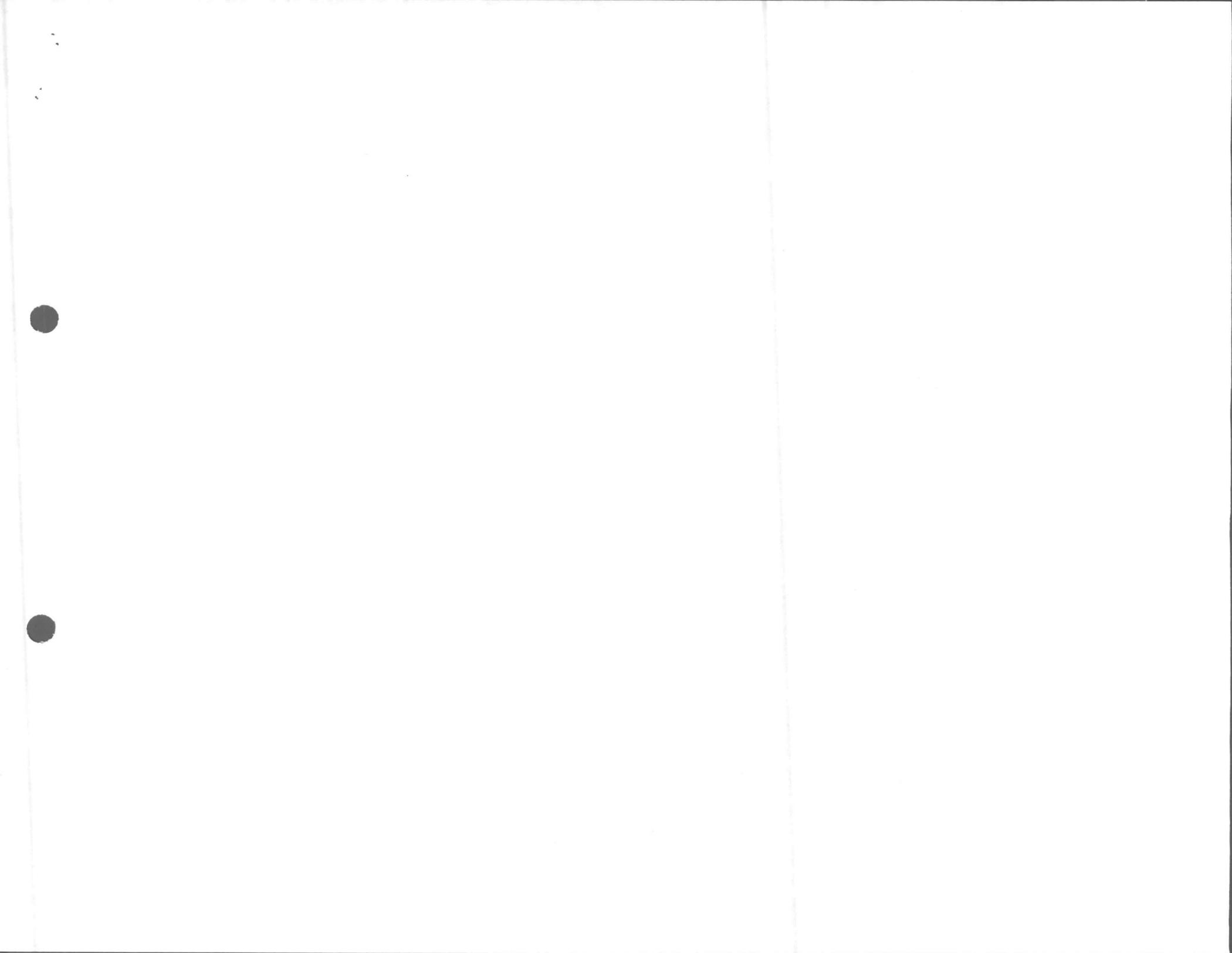
REMARKS: ROOM #'S AC FAN UNIT NOT WORKING: _____

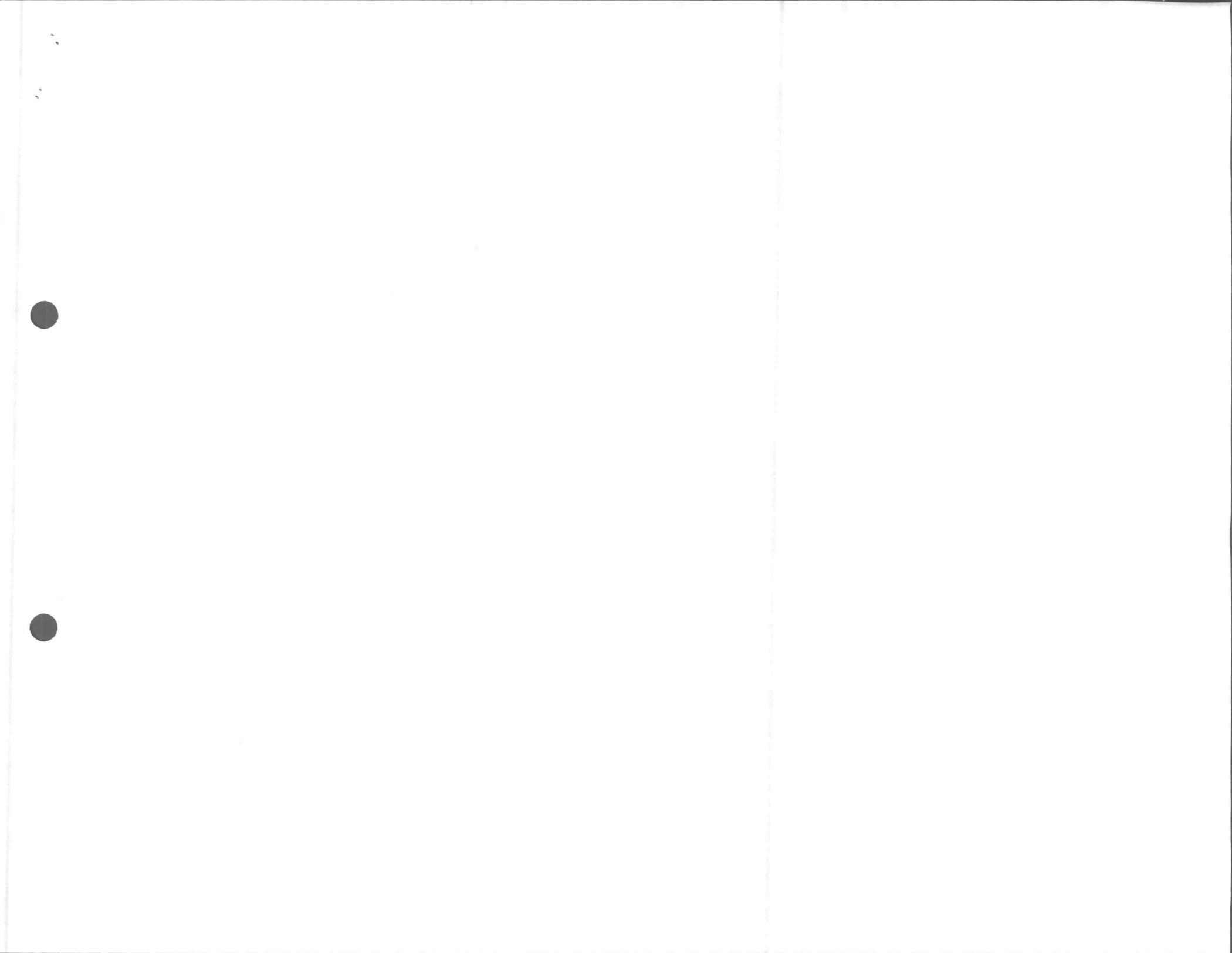
ROOM #'S ENTRANCE DOOR LOCK _____

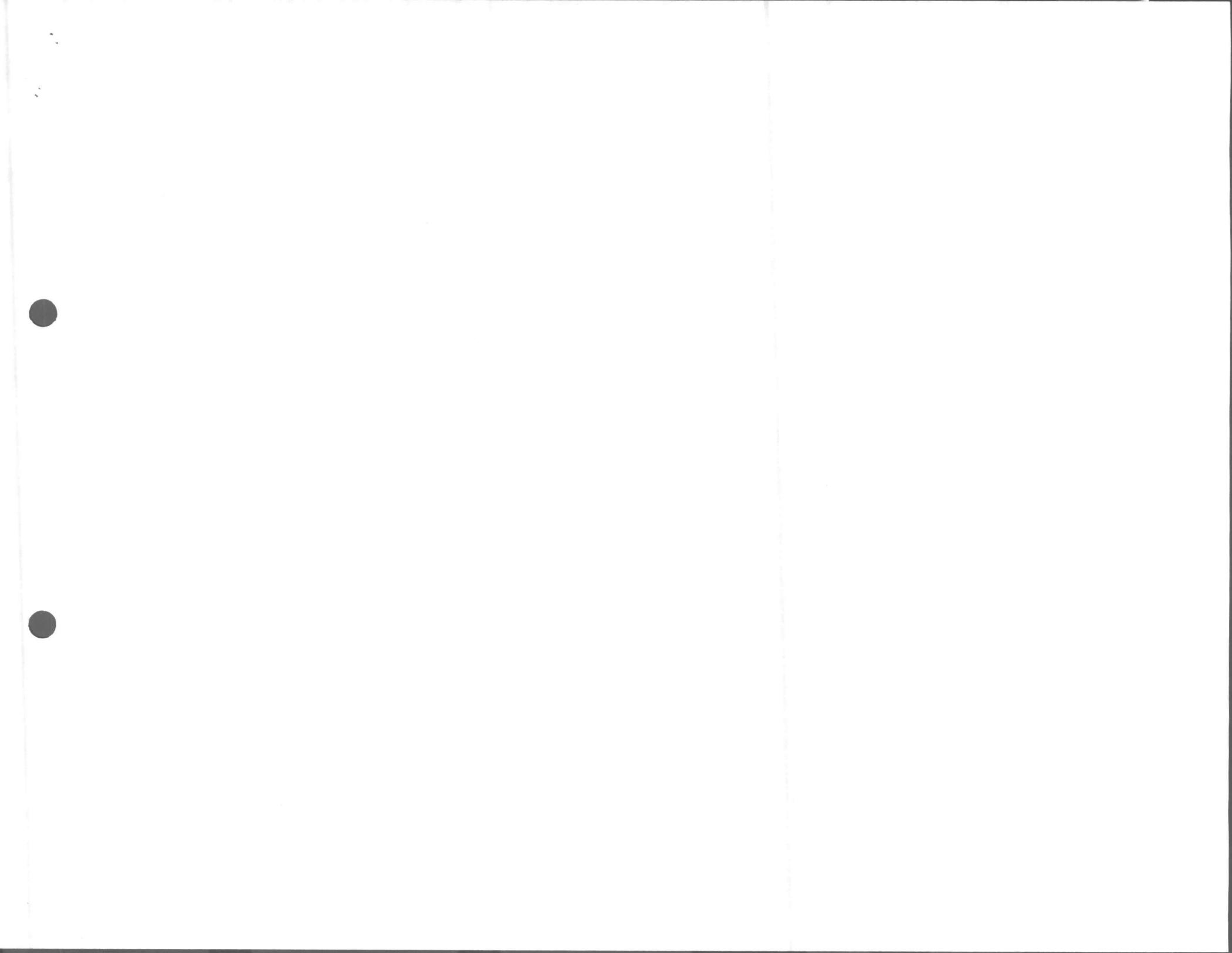
ROOM#'S PAINT PEELING/MOLD _____

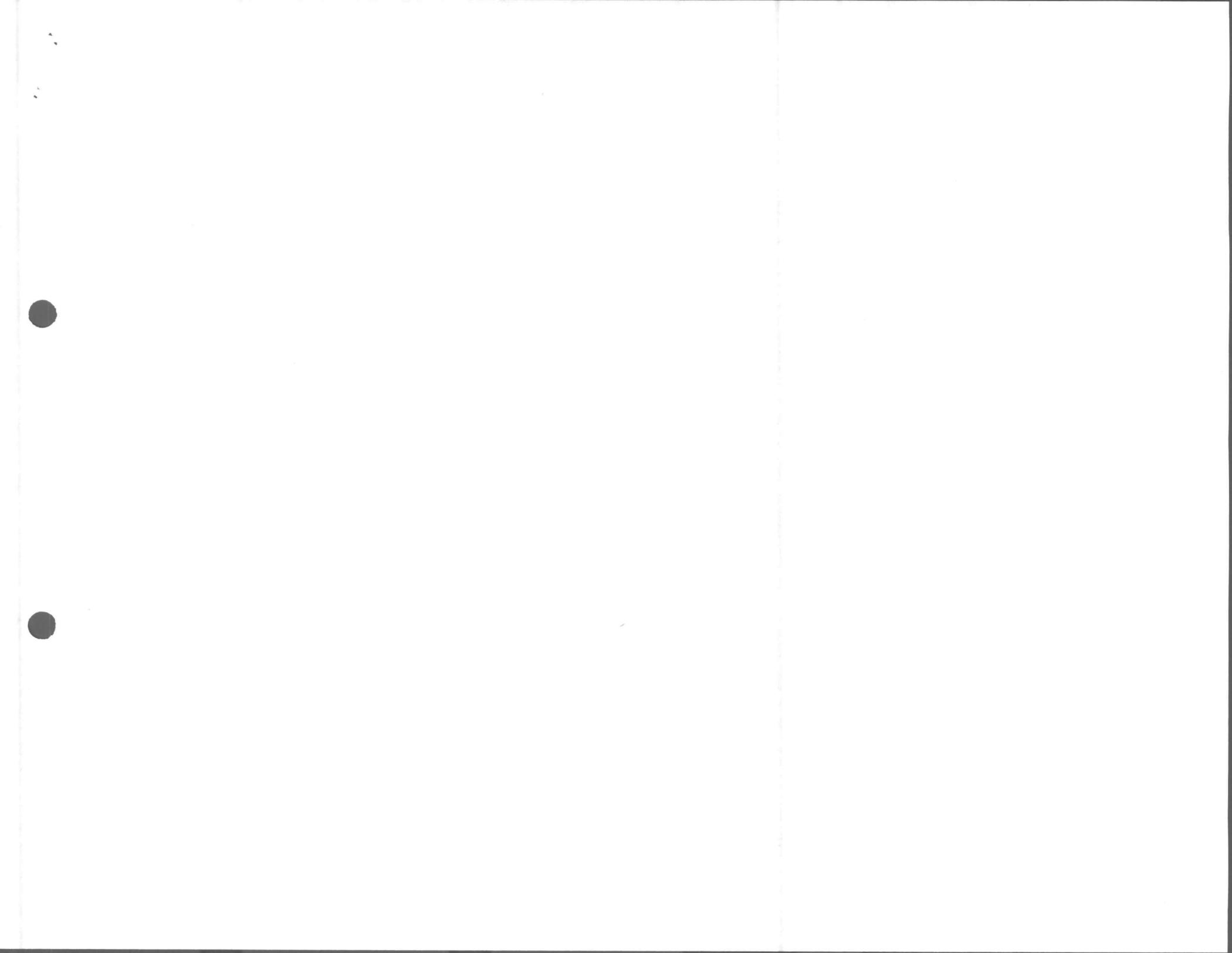
ROOM #'S WALL LOCKER NEEDS REPAIR _____

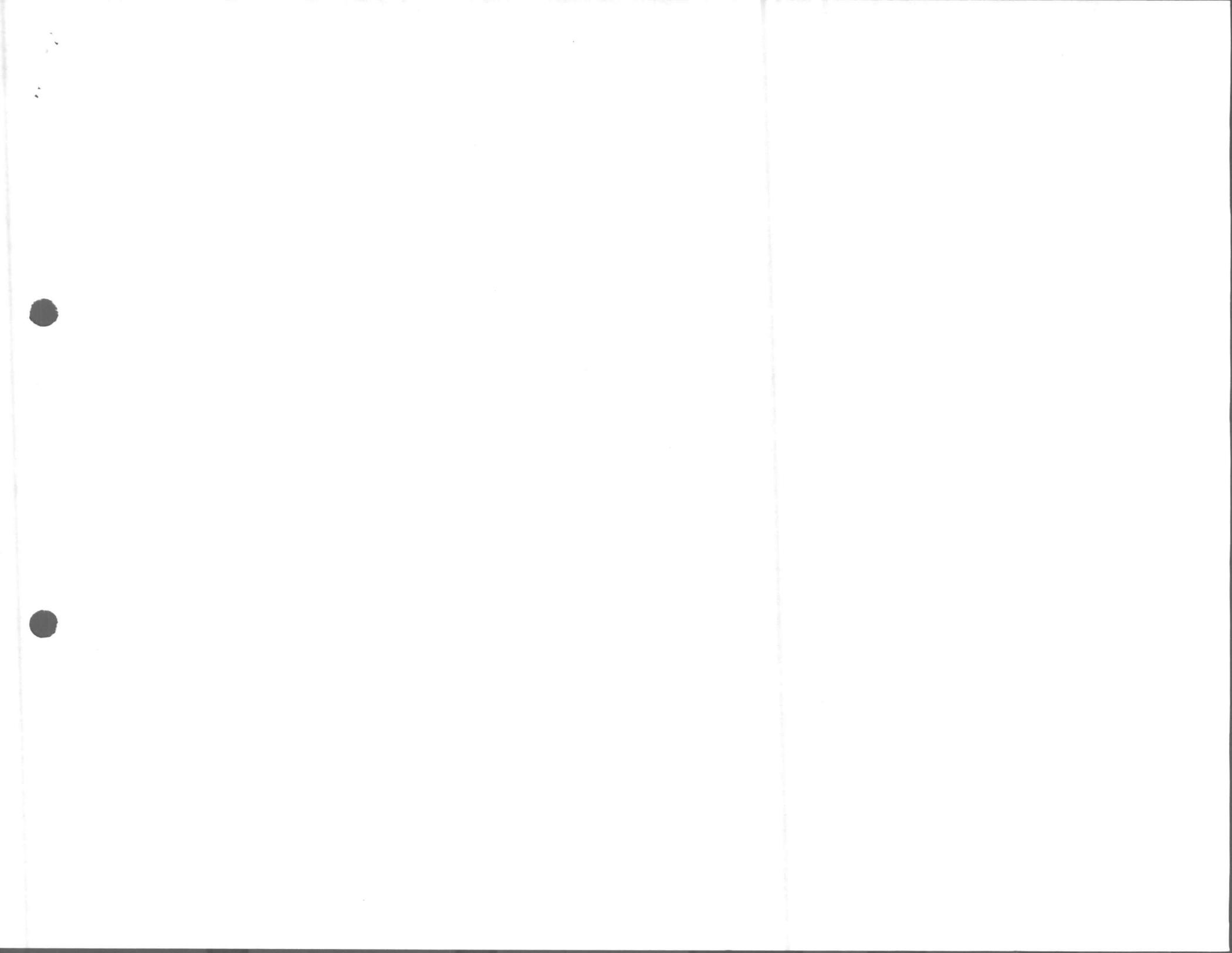
SHT # 25

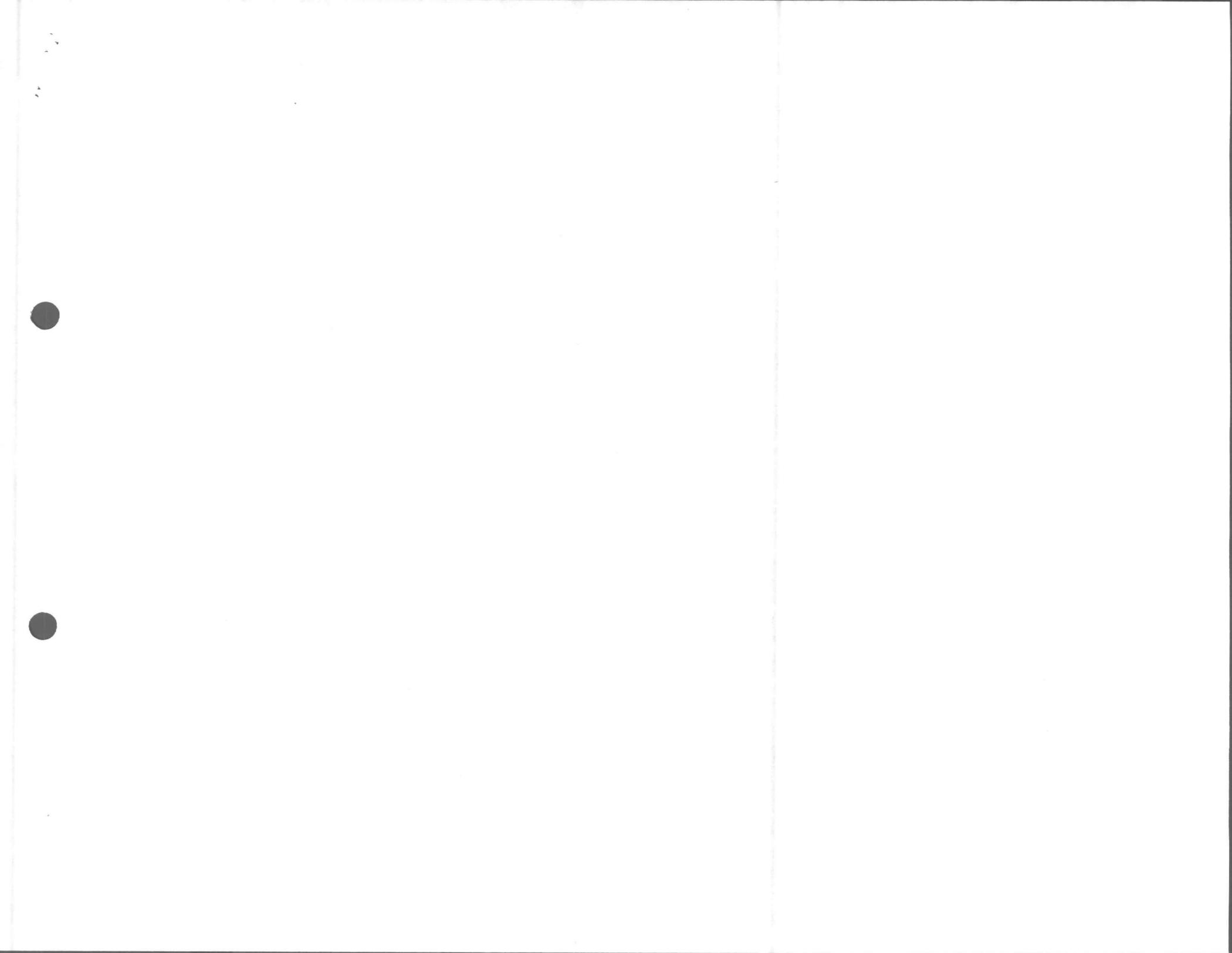


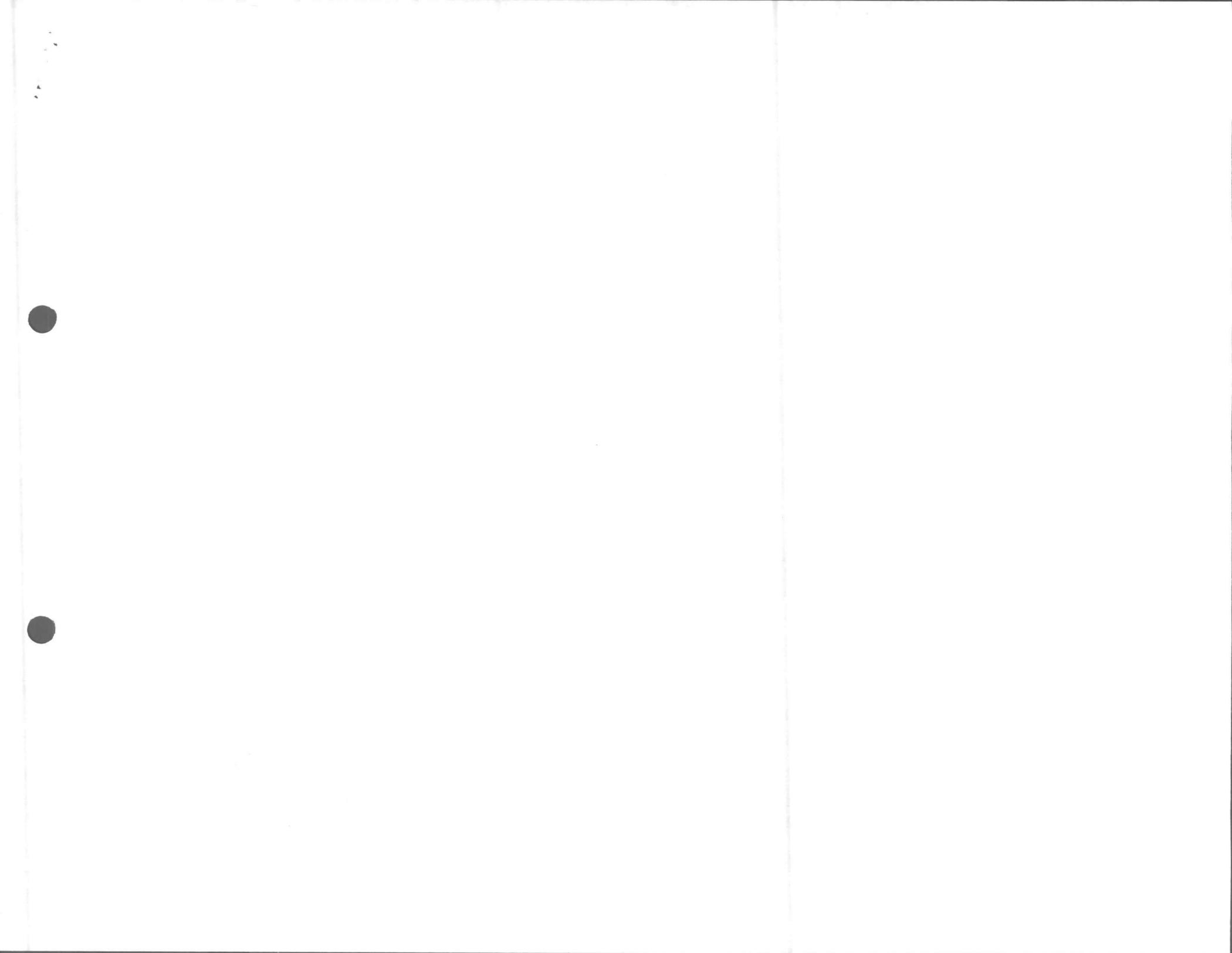












INSPECTION REPORT

MCBCL 11101/16

Area & Facility No.		Date	Inspector & Time (Hours) Used	Sheet #	of	Sheets
HP-301		3/20	Y. M. K. S. I. C.			
Work Center	Urgency Code	DEFICIENCIES: Include Size, Sketches, and/or Special Information regarding needed corrections.		Action Taken	ESTIMATE Man Hours Total Cost	
		MATERIAL (1575)				
		WALL CEILING 135, 101, 335, 315				
		VANITY KIT #1				
		DUCT CENTRAL #1			4510	00-116-3152
		RECA #1			4510	00-20-280
		RECA			4510	00-20-156
		MICRO LIGHT #1				
		OUTLET CEILING #				
		ROOM #10 Bldg 216, 223				
		SHEATH HEAD #114				
		TRICET RUNS #		4510-01-0322	4372	5.00
		VENT #		9P 110000	10	
		FAULT SCENE 1		4110	20	
		TRICET UNIT PUSH 1		5000	100	
		SINK CLEVER #		6250-01-000-177-1	5.00	
		Flexonit Bldg 216				
		5340-3J-944-VIEW		6240-01-306-8247		
129		6210-CR-AUF-2105		6240-01-004-3107		
500		6210-RB-792-PLM		6200 6200		
		6210-02-FUS-0048				

* URGENCY CODE: Enter appropriate Code as follows:

- A. Emergency nature, should be corrected as soon as possible.
- B. Essential Maintenance, should be corrected within one (1) year.
- C. Projected Maintenance, correction can wait one or more years, indicate # of years.

* ACTION TAKEN

- 1. Emergency
- 2. Preventive Maint.
- 3. S. W. O. P.
- 4. Deferred Maintenance

(32)



CSI	Description for HP-301	Takeoff Quantity	Unit	Mat	Total
-----	------------------------	------------------	------	-----	-------

01 General Requirements

01520500	WORK TRAILER, SET UP	2.0	each		
01832350	TIME ALLOWED FOR SECURING TOOLS DAILY	6.0	DAYS		
01832350	TIME ALLOWED FOR CLEANUP PER ROOM	40.0	ROOM		
01832350	ESTIMATED TIME FOR GOING IN ROOMS WITH NO IDENTIFIED DESCR.	55.0	ROOM		
01832350	ESTIMATED TIME FOR REPAIRS ON BLDG WITH NO INSPECTION		ROOM		
01832350	TIME ALLOWED FOR DOCUMENTING REQUIRED REPAIRS IN ROOM	40.0	UNITS		

ements Total General Requirements Total

06 Wood & Plastics

06110530	Framing joists, 2x8,mout/bolt concrete, sec dryers		each		
----------	--	--	------	--	--

stics Total Wood & Plastics Total

08 Doors & Windows

08710340	Doorstops, kick down pad, replace		each		
08710340	Door stop, holder, wall mounted with hook and bumper		each		
08710340	Pull handle, install, passageway door		each		
08710340	Door stop, kick down, mounted on door		each		
08710400	Lock, bathroom, passageway/ replace		each		
08710400	Passageway door, lock set, repair		each		
08720800	Threshold, install new		each		
08720800	Cover, drain, install on drain		each		
08720800	Vanity, replace entire unit/van,fauc,top,supply lines & trap	2.0	each		
08720800	Vanity, cabinet door, replace		each		
08720800	Vanity, cabinet hinges, replace		each		
08720800	Vanity, cabinet door secure		each		
08720800	Vanity, cabinet hinges, secure		each		
08720800	Wall locker, repair		each		
08720800	Window, spray frosted tint to secure vision.		each		
08720800	Tile, floor tile replace		each		
08720800	Tile, ceramic around shower drain		each		
08720800	Window, lock replace		each		
08720800	Drip cap, secure		each		
08720800	Threshold, secure, existing unit		each		

doors Total Doors & Windows Total

Finishes

09510700	Tile, ceiling, remove ceiling fan & replace ceiling tile		each		
09510700	Tile, ceiling tile splein 2 x 2 ft		each		
09510700	Tile, ceiling 2 x 4' replace		each		
09510700	Tile, ceiling tile splein 1 x 4 ft		each		
09510700	Tile,ceiling, 2 x 2, replace		each		

ishes Total Finishes Total

10 Specialties

10430200	signs, room, instal		each		
10430200	signs, toilet/sink etc., number identification		each		
10430200	signs, build.numb., instal		each		
10820100	Bathroom accessories, mirror 30 x 30		each		
10820100	Mirror, bathroom, 18 x 24.		each		
10820100	Bathroom accessories, toilet seat, rem.old & replace		each		
10820100	Bathroom accessories, toilet paper holder, install new		each		
10820100	Bathroom accessories, toliet paper roller.		each		
10820100	Bathroom accessories, towel bar, stainless steel, 18" long		each		

(33)

11.11.11



CSI	Description for HP-301	Takeoff Quantity	Unit	Mat Total
10820100	Bathroom accessories, towel hook, secure		each	
10820100	Bathroom accessories, coat hook, install		each	
10820100	Bathroom accessories, towel bar, stainless steel, 30" long		each	
10820100	Bathroom accessories, towel bar install, 24"		each	
10820100	Bathroom accessories, toilet partition, secure		each	
10820100	Bathroom accessories, tumbler holder, soap, tumbler & toothbrush		each	

alties Total

Specialties Total

12 Furnishings

12493200	Drapery hardware, tray & curtain rod, adjustable, 30" to 48"		each	
----------	--	--	------	--

ings Total

Furnishings Total

15 Mechanical

15410300	Faucet, hot & cold water identificatin buttons, replace		each	
15410300	Faucet, aerator, replace/clean		each	
15410300	Faucet, supply lines, replace		each	
15410300	P trap, repair leak		each	
15410300	P-Trap, 1 1/4"/1 1/2" replace		each	
15410300	Vanity, replace,cabinet,top,faucet, supply lines & trap		each	
15410300	Faucets stem, room repair	2.0	each	
15410300	Faucet, replace, deep sink		each	
15410300	Faucet, repair, deep sink		each	
15410300	Faucet, replace, room		each	
15410300	Sink, room, unclog	1.0	each	
15410300	Faucet, secure	1.0	each	
15410300	Faucet, pop, remove/repair		each	
15418450	Lavatories, W/trim, vanity top, cultured marb, 37" x 22", sgl bowl		each	
15418500	Shower head, replace	4.0	each	
15418500	Shower head, remove institutional style, install pipe & new shower head		each	
15418500	eschutcheon, at shower head, replace		each	
15418500	Eschutcheon, shower valve, secure		each	
15418500	Valve, shower valve, remove/repair/replace stem		each	
15830100	Fan ,exhaust, repair, rattle noise		each	
15850500	grille, ac return filter grille, install	1.0	each	
15850500	Panel, AC access, secure		each	

anical Total

Mechanical Total

Electrical

16139700	Detector, smoke, secure		each	
16139700	Detector, smoke, replace battery		each	
16139700	Detector, smoke, interior room, replace		each	
16140910	Switch, single pole,/light		each	
16140910	Switch, push button,flur light		each	
16140910	Switch, double/light		each	
16140910	Recepticle, replace	5.0	each	
16140910	Recepticle, secure recepticle & cover		each	
16140910	GFI, replace		each	
16140910	Cover, recep/gfi/switch, replace	1.0	each	
16510440	Fixture, interior, 3ft fluor, replace		each	
16510440	Ballast, replace 2,3, & 4 ft fluorescent light		each	
16510440	Fixture, exterior, harris light, remov.exis&instal new.		each	
16510440	Fixture, interior, 2 ft fluor, replace		each	
16510440	Lens, cover, harris light, head/replace		each	
16510440	Lens, fluorescent, 3ft, replace		each	

34

100



CSI	Description for HP-301	Takeoff Quantity	Unit	Mat Total
16510440	Lens, fluorescent, 4ft replace		each	
16510440	Lens, fluorescent, 2 ft,replace		each	
16510440	Ballast, replace/ interior fluorescent fixture		each	
16530320	Exit light, repair		each	
16530320	Exit light clg or wall mount, L.E.D. battery unit, single face		each	
16530320	Emergency light, repair		each	
16530320	Fan, exhaust/room, replace		each	
16530320	Fan, exhaust, replace cover		each	
16530320	Emer lt units,btry operated,twin sealed bm lt,25 W,6 V ea,lead btry		each	
16585600	Lamps, "U" tubes, lounge		each	
16585600	Lamps, incadescent, red/night lights.		each	
16585600	Lamps, fluor, exterior, security, 7watt		each	
16585600	Lamps, 7 watt for harris fixture head/exterior security		each	
16585600	Lamps, incadescent	5.0	each	
16585600	Lamps, fluorescent, 3 ft, replace		each	
16585600	Lamps, fluorescent, 4 ft, replace		each	
16585600	Lamps, fluorescent, 2 ft, replace		each	
16585600	Lamps, 4 & 8' located on 10ft+ceilings		each	

Electrical Total

Electrical Total

01 (Unassigned)

01905100	TIME ALLOWED TO INSPECT ROOM WITH NO LISTED DESCREPENCIES		each	
----------	---	--	------	--

(Unassigned) Total

(Unassigned) Total

07 Conveying

07121019	H) clean and adjust proximity devices on door.		each	
----------	--	--	------	--

Conveying Total

Conveying Total

08 Mechanical

08110900	Door saver, instal,		each	
08110900	Closure, door, remove		each	
08110900	Door hardwar, replace		each	
08110900	Sink, secure & caulk		each	
08110900	Closure, door, repair		each	
08110900	Install new hinge		sets	
08110900	Vanity/caulk, repair formica		each	
08110900	Lockset, bathroom, replace		each	
08110900	Lock, Window repair/replace		each	
08720300	Install weatherstripping		opng	
08720300	Weather stripping, secure existin.		opng	
08720300	Weather stripping, secure existin.		opng	

Mechanical Total

Mechanical Total

09 (Unassigned)

09310100	Install new tiles		sqft	
09310100	Tile, ceramic, replace		sqft	
09310100	Ceiling, repair, paster/sheetrock		sqft	

(Unassigned) Total

(Unassigned) Total

15 (Unassigned)

15410100	Valve, toilet, rebuild to repair leak/spud/flush vlv		each	
15410100	Valve, toilet, replace spud & vacuum breaker		each	
15410100	Valve, toilet, replace handle repair kit, toilet wont flush	1.0	each	
15410100	Drain, sink,repair leak		each	

35

1000



CSI	Description for HP-301	Takeoff Quantity	Unit	Mat	Total
15410100	Drain, shower, unclog		each		
15410100	Valve, toilet, repair/runs continuously	2.0	each		
15410100	Drain, sink, unclog		each		
15410100	Valve, toilet, adjust water, long/short flush		each		
15410100	Valve, shower, rebuild/replace		each		
15410100	Valve, urinal rebuild		each		
15410100	Flexer, toilet flush vlv, replace		each		
15410100	Valve, urinal flush, replace		each		
15418400	Sink (to 23" x 18", single)		each		
15418400	Vanity, replace cabin.,top,faucet,supply lines,trap		each		

igned) Total

(Unassigned) Total

Grand Total

Grand Total

item

36

100



Totals

3/21/01 8:27am

Percent	Amount	Category for HP-301	Hours	Job Cost Phase
100.00 %	920	Labor	31.3	
		Material		
		Subcontractor		
		Equipment		
		Other		
		User		
	920	Net Costs Subtotal		
	920	Total Estimate	\$0.00/item	

110



BASE MAINTENANCE JOB ORDER

FY 2000	AG/SAC EBES	REQ. CODE B048	REQUEST # P M # 20	DIST. DATE BY 10/22/99	FACILITY # HP 301
AAC M67001	FA 23	WC	FC RP	OC/SOC CAC EBG0	BRC JN/LU EBG0 RON RBC
WGC 4	TYPE OF WORK P M REPAIR	PROJECT # 16282	SKETCH N	PLAN N	SPECIAL INSTRUCTIONS CYCLIC MAINTENANCE PM

FOR FURTHER INFORMATION CONTACT: JOHN YANKOSKY 451-0877

MISC STRUCTURAL, ELECTRICAL, MECHANICAL, AND PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS AS REQUIRED.

CHECK ROOF HATCH ON 3D DECK FOR DAMAGE AND REPORT TO MR. MARSHALL, PH# 5032 ALSO CHECK ROOF DRAINS FOR DEBRIS.

NEED MATERIAL BY: 11/29/99

START DATE: 15 DEC. 1999

NOTE: DO NOT EXCEED COSTS WITHOUT PRIOR APPROVAL FROM P & E 5032/5034

START DATE: 15 Dec 99 COMPLETE BY: COMPLETION DATE: 5/19/00

PHASE SEQUENCE *DB* SUMMARY OF ESTIMATES

PHASE NO.	WORK CENTE	EST HRS	SHEET NUMBE	WORK CENTER	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
1	41CG	236 *	*	41CG	236	\$6,289	\$2,809	\$9,098
		*	*					\$0
		*	*	73	VEH	CHG	\$80	\$80
		*	*					\$0
		*	*					\$0
		*	*					\$0
		*	*					\$0
		*	*					\$0
		*	*					\$0
		*	*					\$0
TOTALS					236	\$6,289	\$2,889	\$9,178

CONTINUED ON SH_0_ THRU_0_

PREPARED BY JOHN YANKOSKY DATE: 10/12/99

REVIEWED BY: *[Signature]*

AUTHORIZED BY: *[Signature]* DATE: 10/13/99

SHEET 1 OF 29

DATE: 10/12/99

EPS JOB: HP 301

*** FEJE - DETAILED ESTIMATES ***
*** PHASE SUMMARY SHEET ***

PAGE: 1

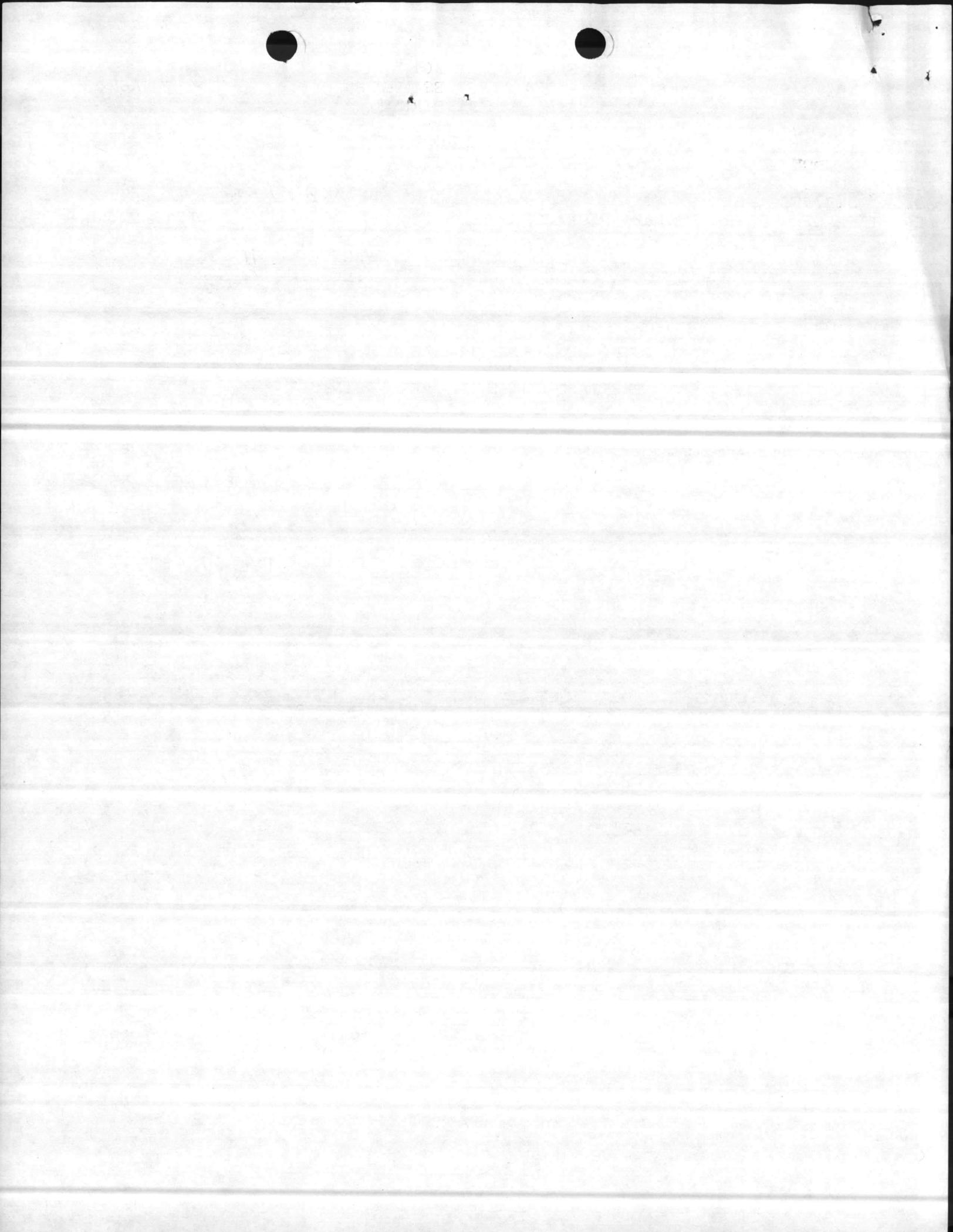
*** PHASE DESCRIPTIONS ***

CRAFT/PHASE	JOB/IFS	WORK CENTER	CRAFT NAME	BLDG/ FACILITY	EST HOURS
1	1/1	41CG	COMPANY CONCEPT CARPENTER	HP-301	236
MISC STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBIC AREAS.					

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

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

SAT #2



DATE: 99/10/12

EPS JOB: HP 301

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

PAGE: 1

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

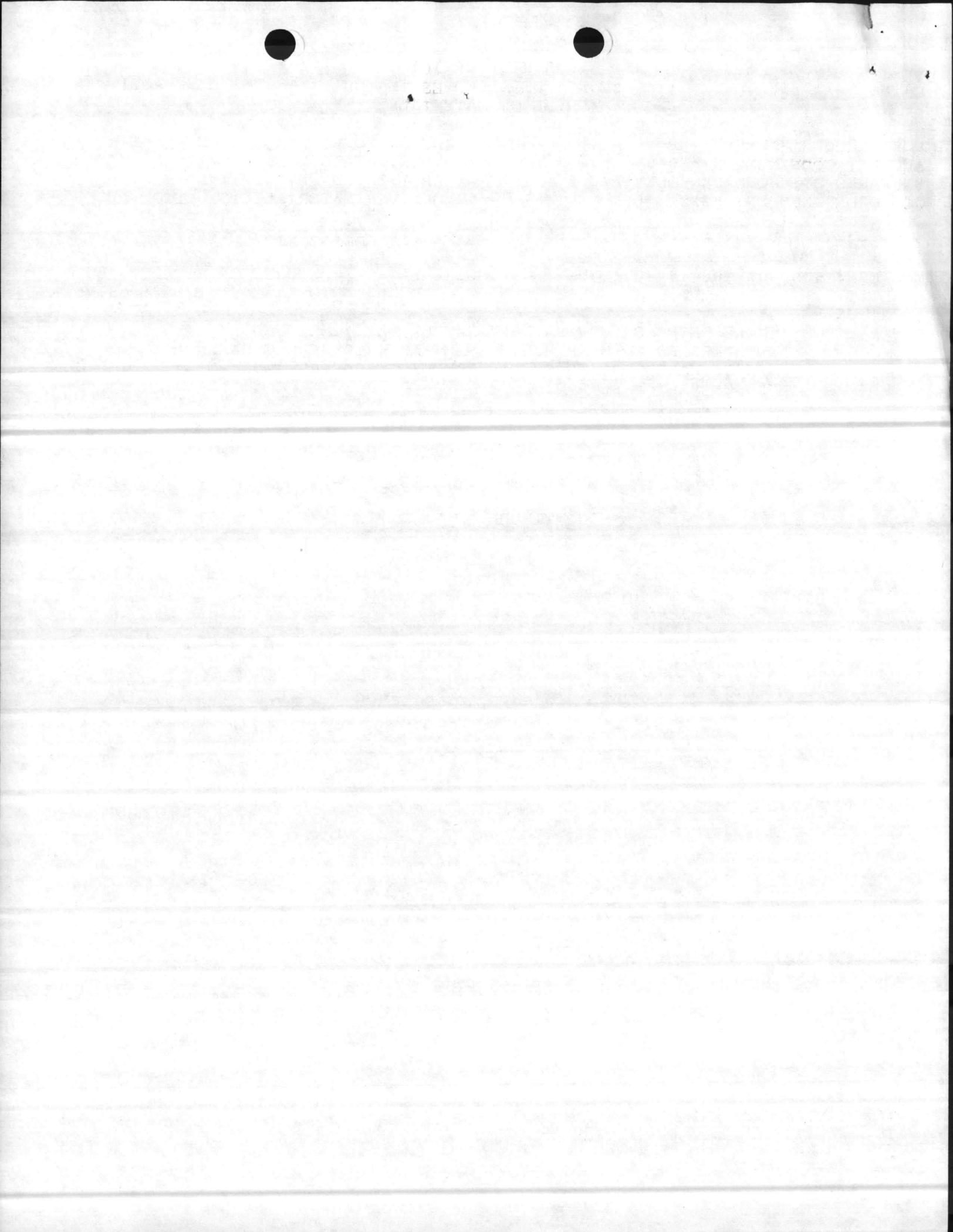
----- (1) -----

MCN-NSN: 6350-01-C00-17740	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: LO
QUANTITY: 5	UNIT COST: 9.75	TOTAL COST: 48.75
LOCATION:		
DESCRIPTION: SMOKE DETECTOR, 9V BATTERY BACKUP, BAT. INCLUDED		
NOW CARRIED IN WARE HOUSE. SAME AS 4210-86-RAC-BATT		
S/S IF WAREHOUSE IS OUT IS MADDUX 1-800-849-5506, LISA		
MADDUX PART # 86 RAC.		

SOS TOTAL COST: \$48.75

*** CONTINUED ON PAGE 2 ***

S47#3



WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

(2)

MCN-NSN: 7320-48-7/8-XX660	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: AMS
QUANTITY: 8	UNIT COST: 44.00	TOTAL COST: 352.00
LOCATION:		
DESCRIPTION: BLIND, 1 " SLAT, 44 7/8" X 66, WHITE LEVOLOR, MONACO STYLE, METAL, WITH MOUNTING HARDWARE S/S AMECO, 1-800-682-0128		

(3)

MCN-NSN: 7320-61-7/8-XX660	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: AMS
QUANTITY: 9	UNIT COST: 45.00	TOTAL COST: 405.00
DESCRIPTION: BLIND, 1" SLATS, WHITE, 61 7/8" X 66 LEVOLOR, MONACO STLE, METAL 1-800-682-0128		

SOS TOTAL COST: \$757.00

*** CONTINUED ON PAGE 3 ***

SH74



23

DATE: 99/10/12

EPS JOB: HP 301

*** FEJE - DETAILED ESTIMATES ***

PAGE: 3

*** BILL OF MATERIALS ***

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

④

MCN-NSN: 1000-GR-ILL-10140 UNIT OF ISSUE: EA SOURCE OF SUPPLY: BPA
QUANTITY: 2 UNIT COST: 7.47 TOTAL COST: 14.94

LOCATION:
DESCRIPTION: GRILLE, ALUM., 10" X 4", SHOWER EXHAUST VENT,
P/N 42004, HART & COOLEY, RH45 GRILLE, HORIZONTAL,
BARS AT 45 DEGREES.
S/S YANDEL-WITHERSPOON
GOLDSBORO, NC.

⑤

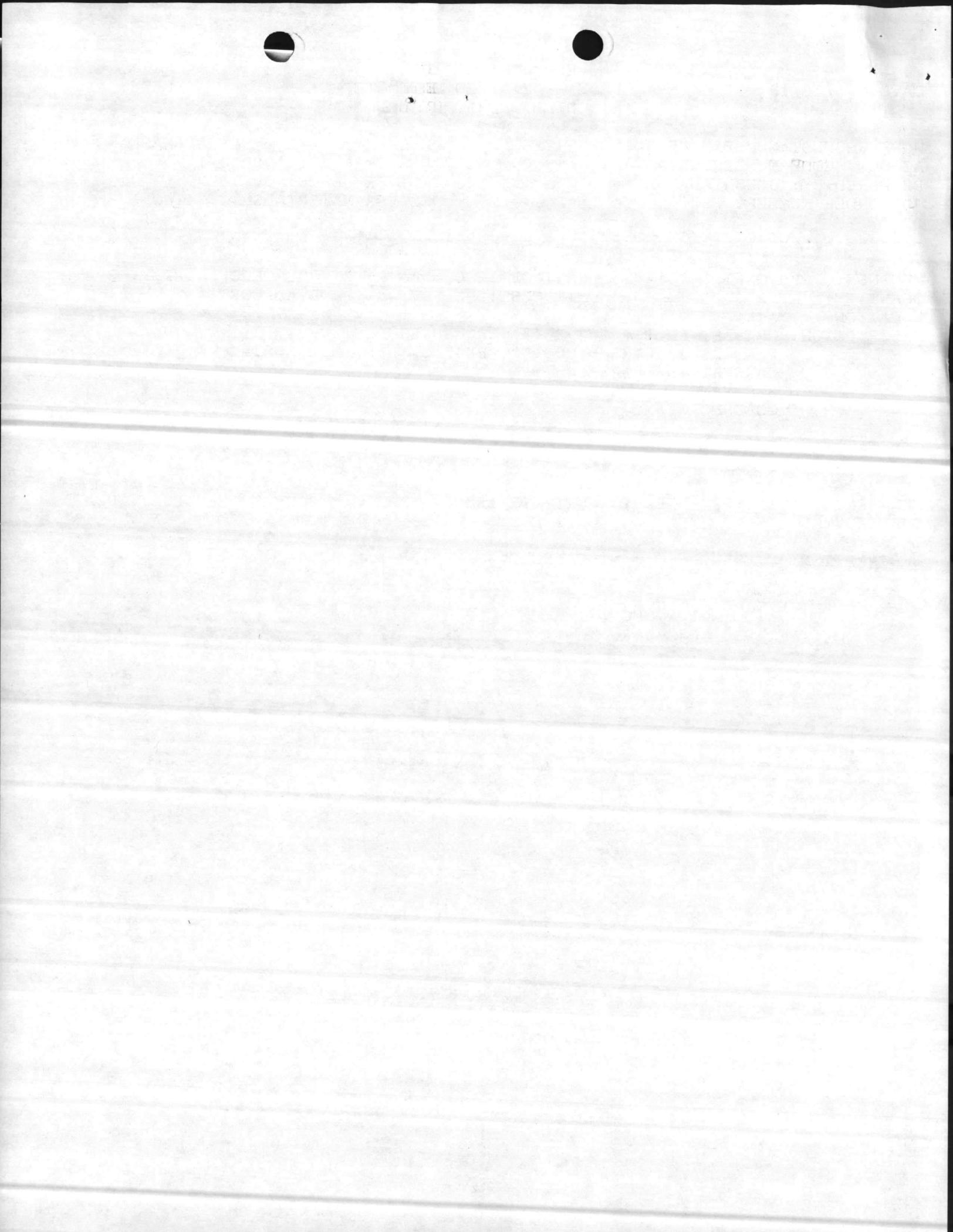
MCN-NSN: 5340-3J-944-VIEW0 UNIT OF ISSUE: EA SOURCE OF SUPPLY: BPA
QUANTITY: 5 UNIT COST: 3.89 TOTAL COST: 19.45

LOCATION:
DESCRIPTION: VIEWER, DOOR, WIDE ANGLE, GRAINGER P/N 3J944
S/S GRAINGER
505 COVIL AVE.
WILMINGTON, NC.
1-910-762-3088

SOS TOTAL COST: \$34.39

*** CONTINUED ON PAGE 4 ***

SAT #5



DATE: 99/10/12

EPS JOB: HP 301
*** FEJE - DETAILED ESTIMATES ***
*** BILL OF MATERIALS ***

PAGE: 4

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

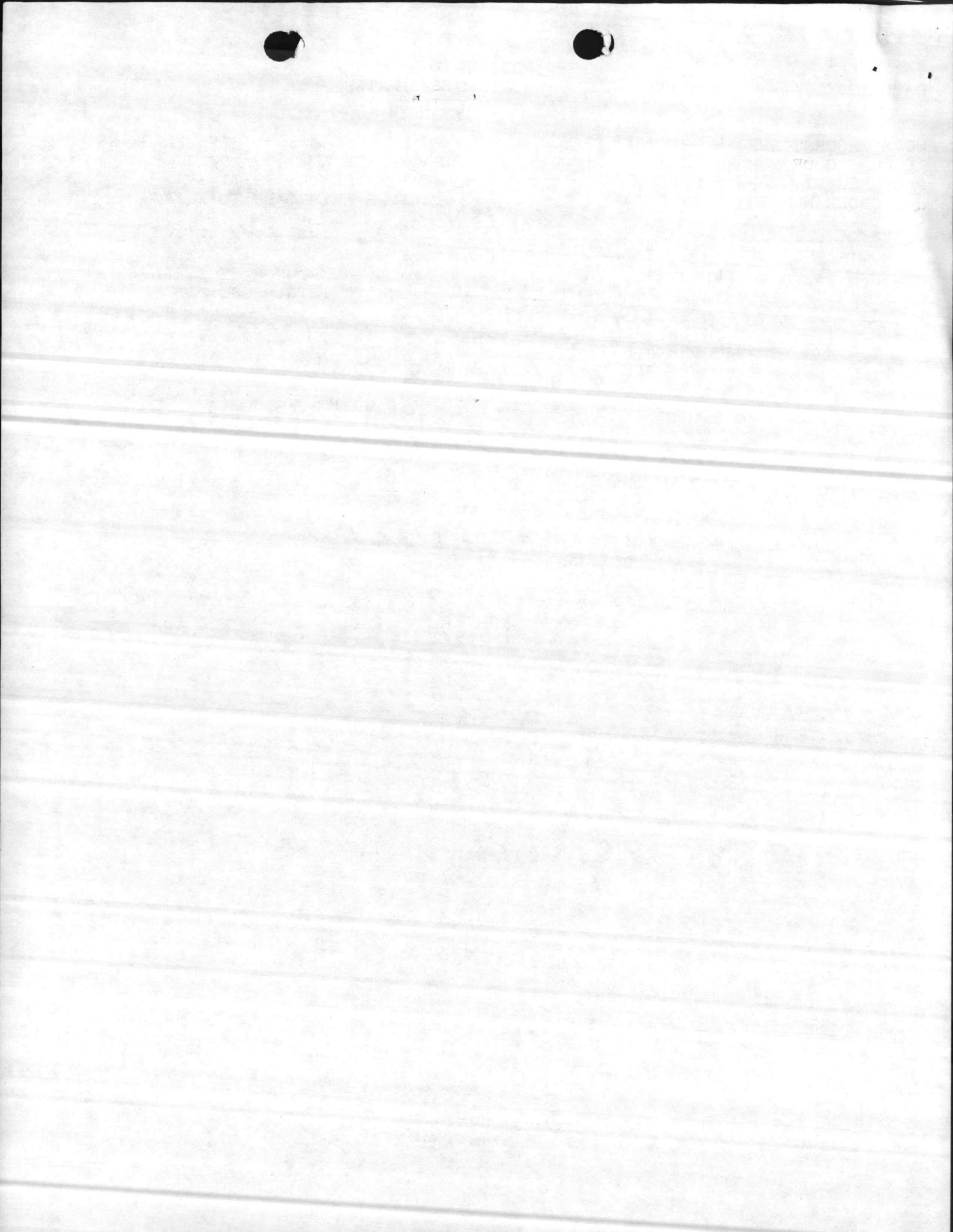
MCN-NSN: 6210-CR-AVF-21050 UNIT OF ISSUE: EA SOURCE OF SUPPLY: CR
QUANTITY: 6 UNIT COST: 34.00 TOTAL COST: 204.00
LOCATION:
DESCRIPTION: LENS COVER, FLUOR. 4 FT.

CRAVEN PART# F-2105
S/S CRAVEN ELECTRIC, JACKSONVILLE, N.C.
353-4643
USED FOR OFFICE SPACES IN HP-51,53& HP 185PASSAGEWAY
. . .

SOS TOTAL COST: \$204.00

*** CONTINUED ON PAGE 5 ***

S 47 # 6



DATE: 99/10/12

EPS JOB: HP 301

*** FEJE - DETAILED ESTIMATES ***

PAGE: 5

*** BILL OF MATERIALS ***

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

 ⑦
 MCN-NSN: 4510-00-202-76860 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 2 UNIT COST: 5.44 TOTAL COST: 10.88
 LOCATION:
 DESCRIPTION: SEAT, WATER CLOSET, WHITE PLASTIC W/COVER, CLOSED FRONT,
 TARNISH PROOF HINGES. USED FOR HOUSING, RESIDENTIAL TYPE
 NOT USED IN BARRACKS

⑧
 MCN-NSN: 4510-00-326-27240 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 10 UNIT COST: 2.38 TOTAL COST: 23.80
 LOCATION:
 DESCRIPTION: AREATOR, FAUCET, 13/16", MALE THD., SEXAUER.

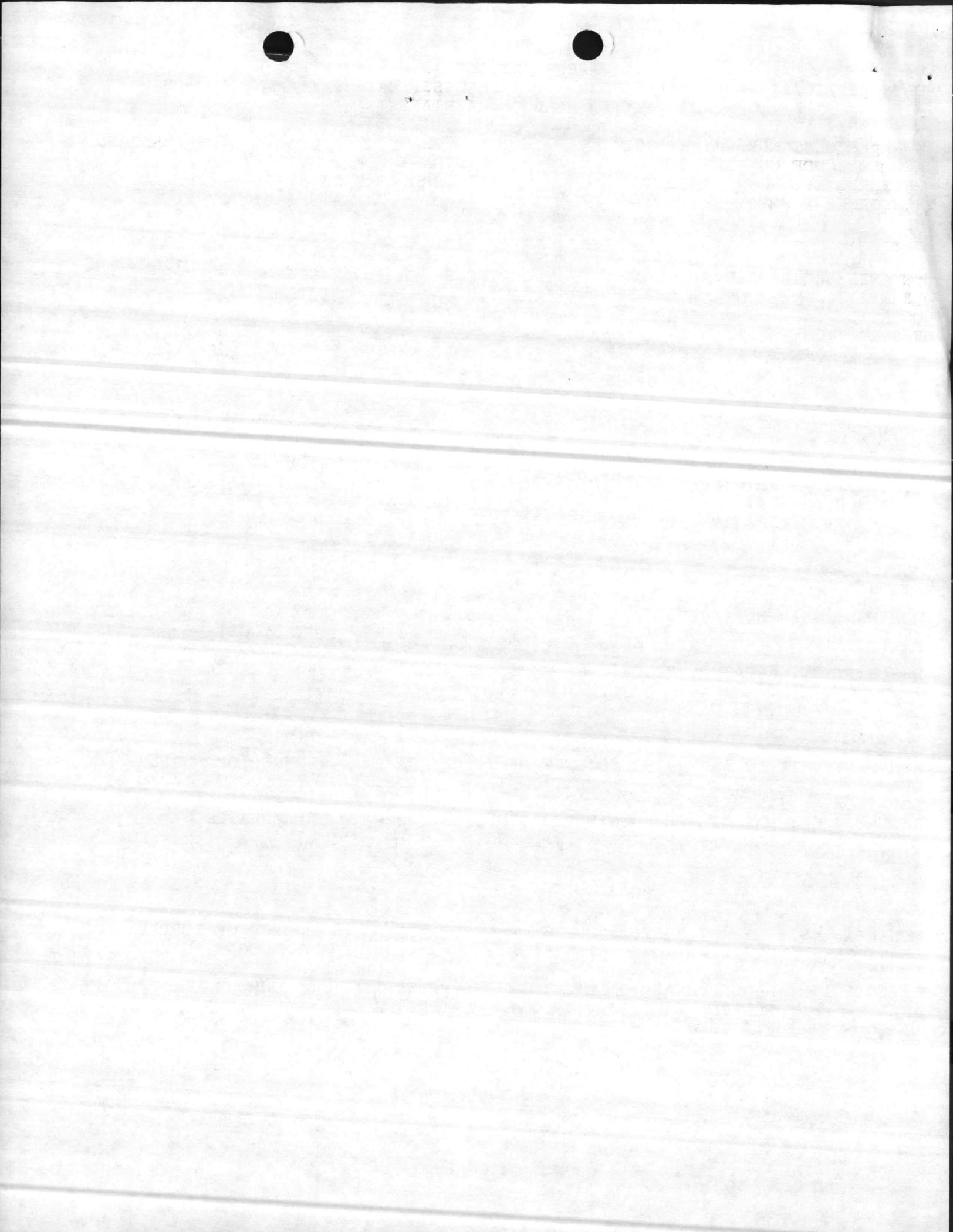
⑨
 MCN-NSN: 4510-00-764-70670 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 10 UNIT COST: .72 TOTAL COST: 7.20
 LOCATION:
 DESCRIPTION: AREATOR, FAUCET, MALE, 15/16" THD, P/N 7259 SEXAUER.

⑩
 MCN-NSN: 4510-01-037-43780 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 5 UNIT COST: 5.85 TOTAL COST: 29.25
 LOCATION:
 DESCRIPTION: BAR, TOWEL, STAINLESS STEEL, W/SCREW IN WALL PLATES,
 BAR 3/4" SQUARE X 24" LONG.

⑪
 MCN-NSN: 4510-01-187-25570 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
 QUANTITY: 27 UNIT COST: 4.90 TOTAL COST: 132.30
 LOCATION:
 DESCRIPTION: SHOWER HEAD, BALL JOINT CONE PATTERN, BRASS CHROME
 PLATED W/ADJ SPRAY, .05" THD INTERNAL,
 P/N 3024K11 MCMaster-CARR.

*** CONTINUED ON PAGE 6 ***

SH#
LA#



DATE: 99/10/12

EPS JOB: HP 301
*** FEJE - DETAILED ESTIMATES ***
*** BILL OF MATERIALS ***

PAGE: 6

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

(12)

MCN-NSN: 4510-01-C00-06710 UNIT OF ISSUE: PR SOURCE OF SUPPLY: LOC
QUANTITY: 5 UNIT COST: 4.90 TOTAL COST: 24.50
LOCATION:
DESCRIPTION: HOLDER, TOILET TISSUE, CHROME, P/N 632 SEACHROME.

(13)

MCN-NSN: 5925-01-231-54230 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 5 UNIT COST: 10.21 TOTAL COST: 51.05
LOCATION:
DESCRIPTION: INTERRUPTER, GROUND FAULT, TWO GROUND FAULT PROTECTED
OUTLETS, 20A, IVORY COLOR, NEMA5-20R,
P/N 647-2V (EAGLE).

(14)

MCN-NSN: 5930-01-C00-78860 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 10 UNIT COST: .61 TOTAL COST: 6.10
LOCATION:
DESCRIPTION: SWITCH, TOGGLE, 1 POLE, SNGL THROW, 15A, 120V, SCR TERM,

(15)

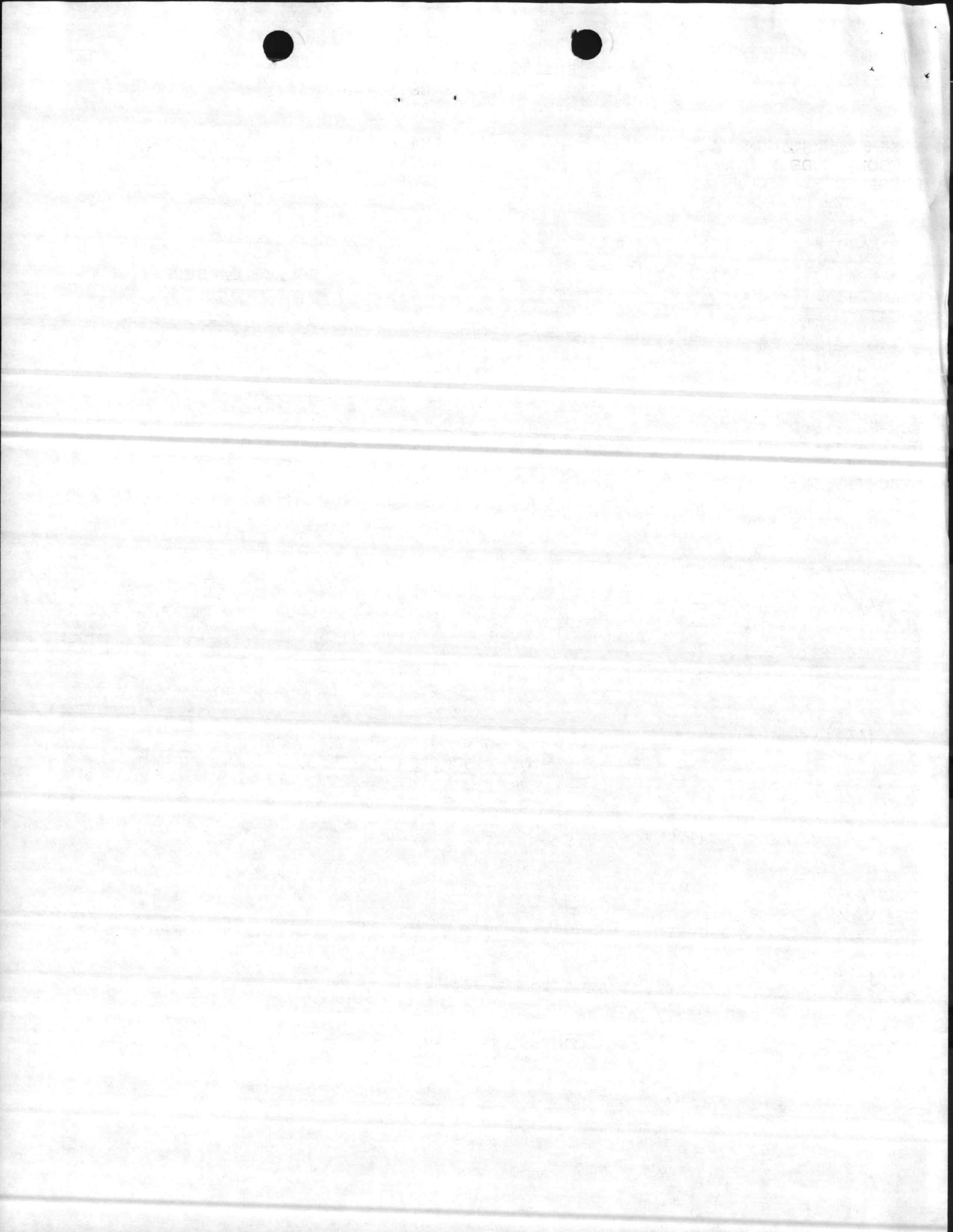
MCN-NSN: 5975-00-682-05610 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 5 UNIT COST: .94 TOTAL COST: 4.70
LOCATION:
DESCRIPTION: PLATE, WALL, ELECTRIC, 1 GNGMTGGL SWITCH TYP, STNLSS
STL, SATIN FINISH.

(16)

MCN-NSN: 5975-00-950-59010 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 2 UNIT COST: 1.49 TOTAL COST: 2.98
LOCATION:
DESCRIPTION: PLATE, WALL, 3 GANG TOGGLE SWITCH
PLASTIC, IVORY

*** CONTINUED ON PAGE 7 ***

SHT# 8



DATE: 99/10/12

EPS JOB: HP 301

*** FEJE - DETAILED ESTIMATES ***

PAGE: 7

*** BILL OF MATERIALS ***

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

17

MCN-NSN: 6210-00-299-72170 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 10 UNIT COST: 2.10 TOTAL COST: 21.00
LOCATION:
DESCRIPTION: GLOBE, ELECTRIC LIGHT, GLASS, COLORLESS CLEAR, SMOOTH
INSIDE/OUTSIDE. EXT THD MT, 3-3/4"D X 6-3/4" L,
P/N V75 (CROUSE HINDS).

18

MCN-NSN: 6210-01-C00-01790 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 10 UNIT COST: 76.00 TOTAL COST: 760.00
LOCATION:
DESCRIPTION: FIXTURE, LIGHT, FLUOR, WALL OR CEILING MOUNT, 2 LAMP
DOWN ONLY, 2", 20W, 120V, RAPID START BALLAST.
CZW2222-2 THOMAS INDUSTRIES, OLD PART #
DO NOT SUBSTITUTE. WANT TO KEEP UNIFORMITY IN
BLDG. THESE ARE CARRIED IN WAREHOUSE
NEW PART # CD220B-120

19

MCN-NSN: 6240-01-157-51140 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 24 UNIT COST: .29 TOTAL COST: 6.96
LOCATION:
DESCRIPTION: LAMP, INCAND, 130V, 90W, NED SCR BASE, A-19
WHITE LIGHT, P/N 100A-90WM (SYLVANIA)

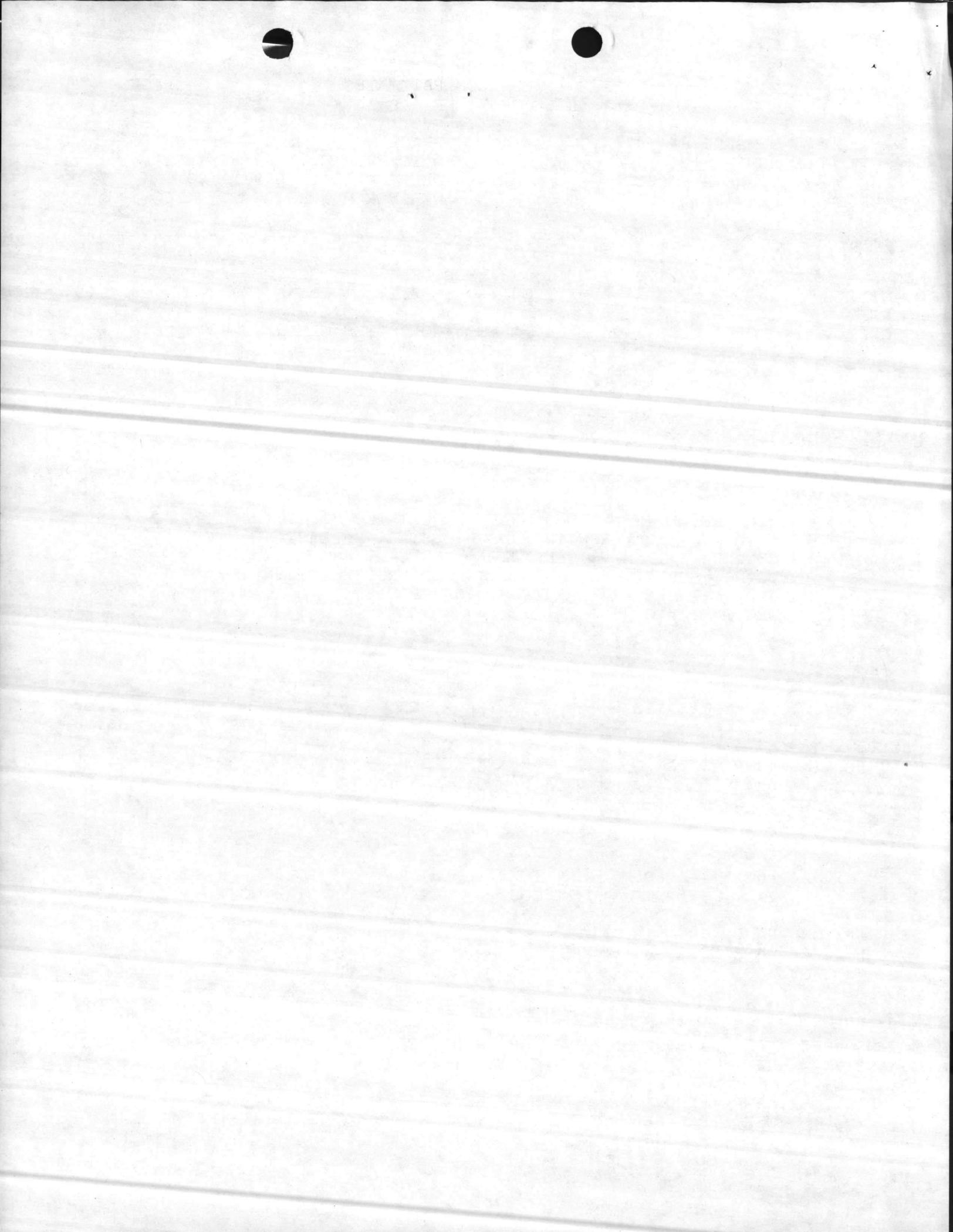
20

MCN-NSN: 6240-01-344-47800 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 24 UNIT COST: .60 TOTAL COST: 14.40
LOCATION:
DESCRIPTION: LAMP, 60W, INCAND.
CARRIED IN WAREHOUSE

21

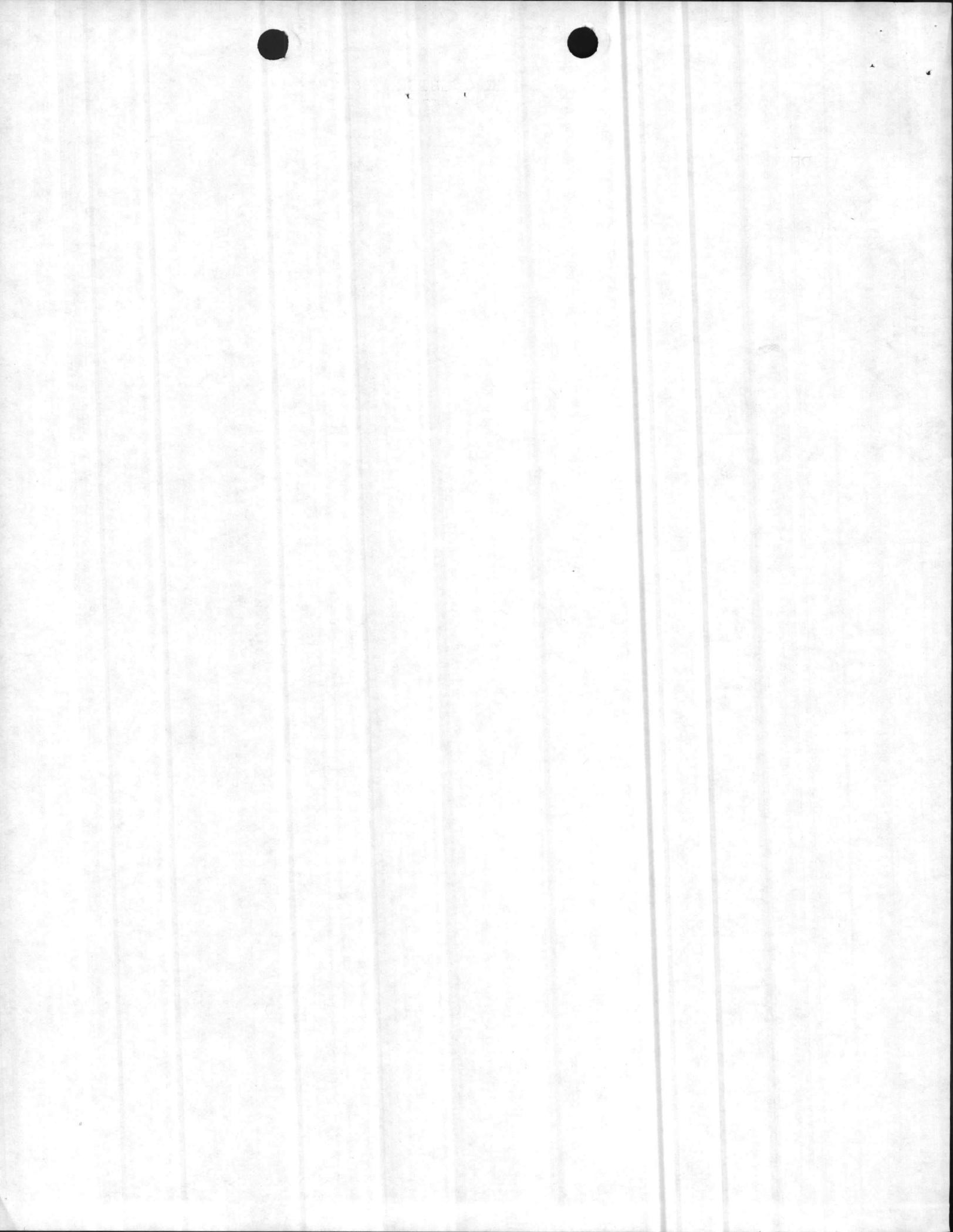
MCN-NSN: 6240-01-344-95320 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 20 UNIT COST: 1.72 TOTAL COST: 34.40
LOCATION:
DESCRIPTION: LAMP, FLUOR, 9W, BIPIN BASE, 6-9/32" L, PL BULB,
USE W/PRE HEAT BALLAST ONLY, P/N PL9-82 (PHILLIPS)

6 # SHS



*** CONTINUED ON PAGE 8 ***

SAT # 16



DATE: 99/10/12

EPS JOB: HP 301

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

PAGE: 8

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

22

MCN-NSN: 6240-01-C00-18320 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 24 UNIT COST: 10.80 TOTAL COST: 259.20
LOCATION:
DESCRIPTION: LAMP, FLUOR, T-8 U-SHAPED, USED IN LOUNGE
RENOVATED BY MWR.
S/S CARRIED IN WAREHOUSE
UNIT OF ISSUE IS EACH BUT PACKAGED 12 TO A CASE
. . .

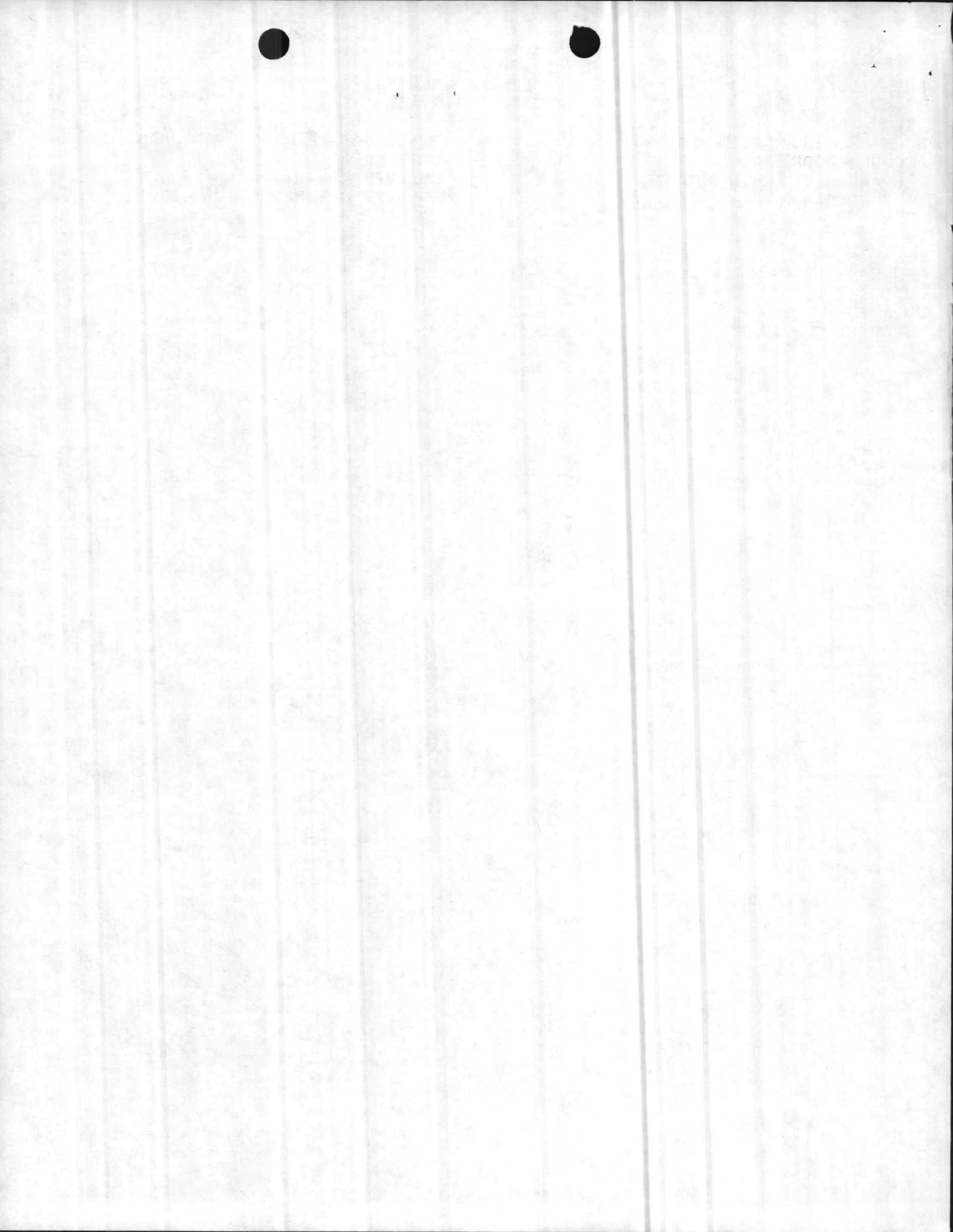
23

MCN-NSN: MISC-MA-TTI-AL000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 30 UNIT COST: 10.00 TOTAL COST: 300.00
LOCATION:
DESCRIPTION: MISC MATERIAL.
. . .

SOS TOTAL COST: \$1688.72

*** CONTINUED ON PAGE 9 ***

SAT #11



DATE: 99/10/12

EPS JOB: HP 301

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

PAGE: 9

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY
JOB ORDER NUMBER: F822

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 99/10/12
DELIVERY DATE: 99/11/29
DELIVER MATERIALS TO: 41CG

(24)

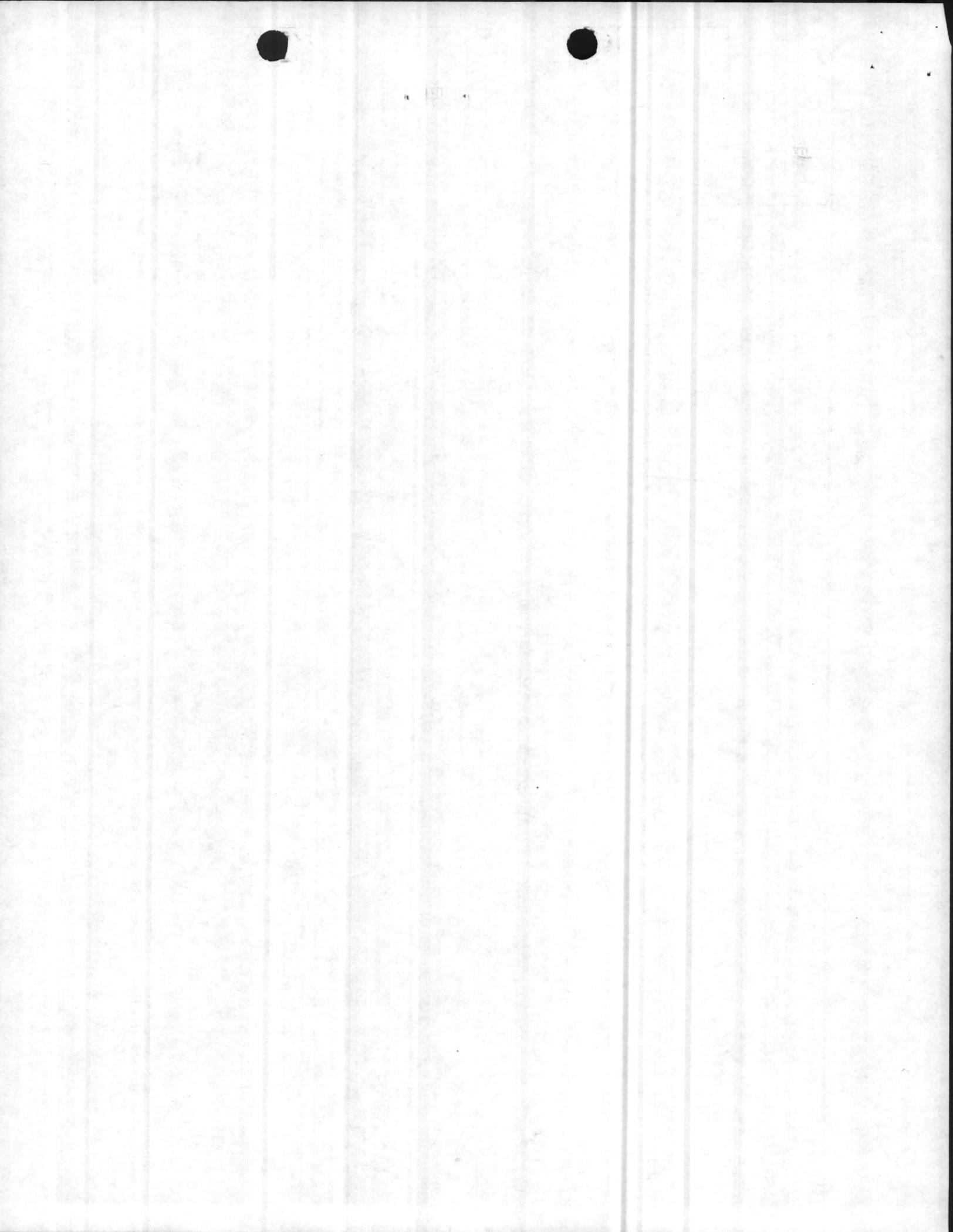
MCN-NSN: 4510-RP-199-1AST0 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 5 UNIT COST: 15.30 TOTAL COST: 76.50

LOCATION:
DESCRIPTION: SHOWER VALVE, KIT, CARTRIDGE FOR SHOWER VALVE
SPINNING PAST STOP.
S/S PALMETTO PARTS, 1-800-830-0426
PALMETTO PART # RP1991, CHANGED TO P099-109
DELTA SCALD GUARD

SOS TOTAL COST: \$76.50

PHASE TOTAL COST: \$2809.36

SHT #12



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR YANKOSKI 10-7-99

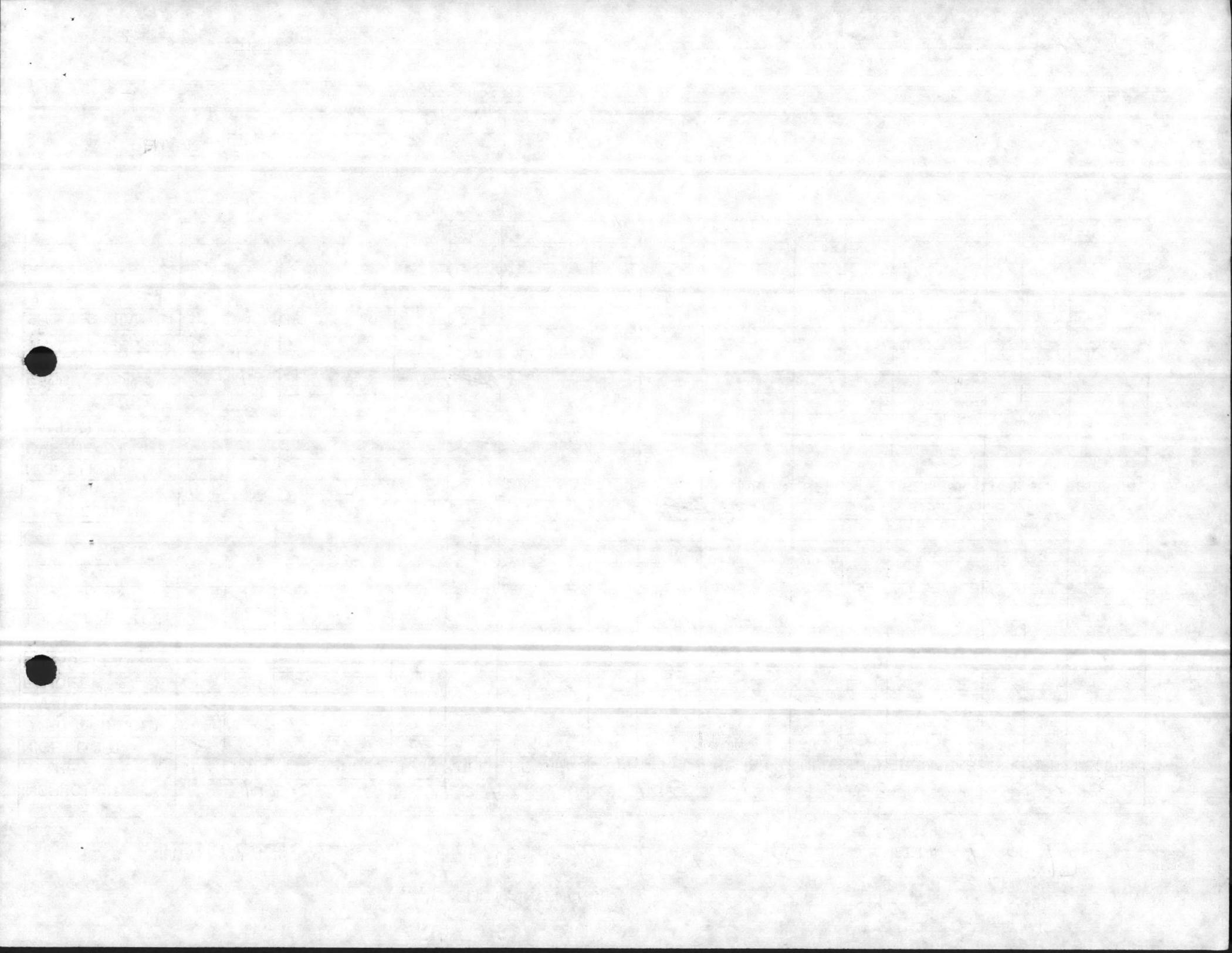
SHEET # 1 OF 17

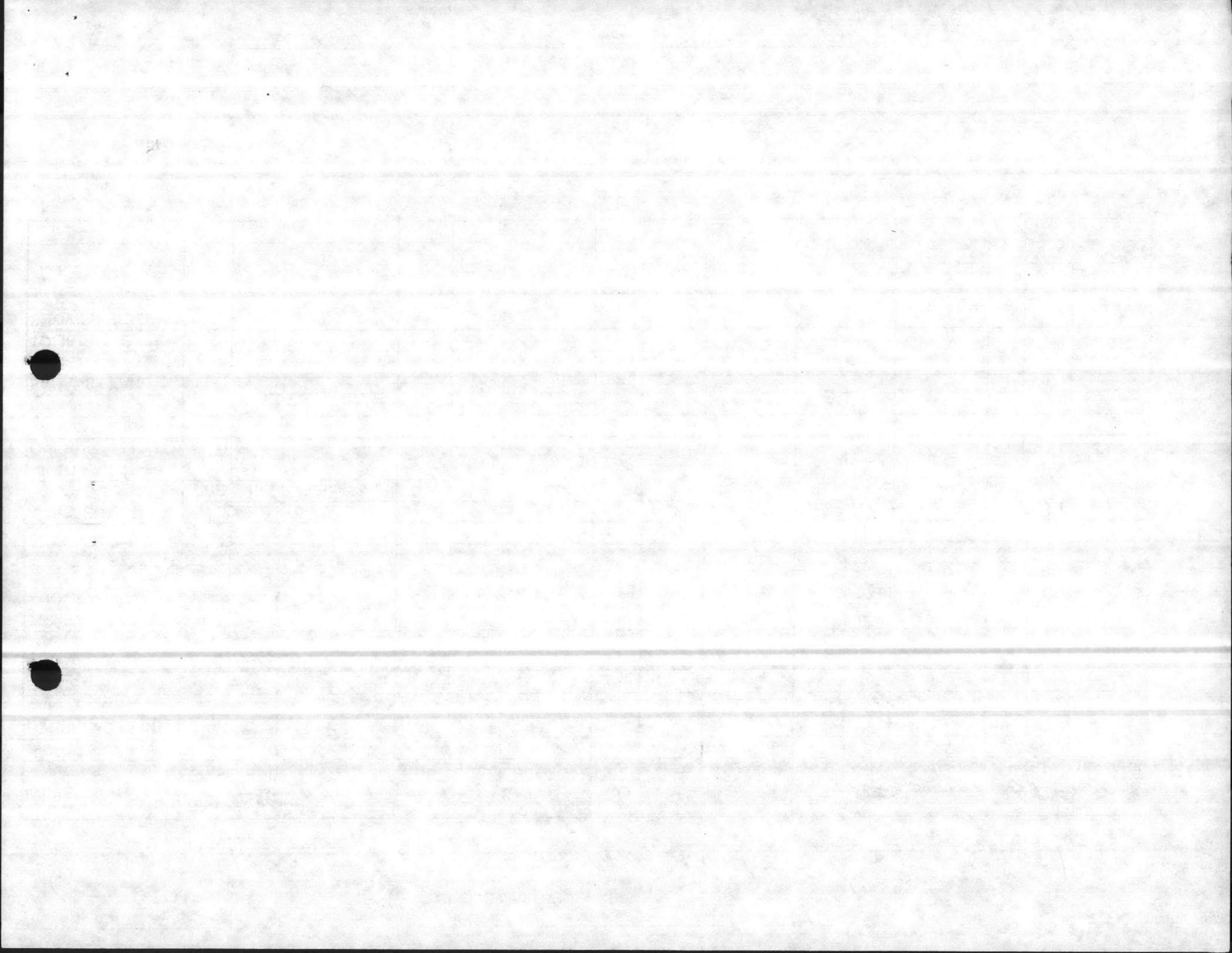
INSPECTION AREAS	102			104			106			108			OFFICE		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT	✓			✓											
OVERHEAD LIGHT															
VANITY LIGHT	✓						✓			✓					
FAUCET															
EXHAUST FAN															P.M.
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD		1									1				
AC PANEL	✓														
SMOKE DETECTOR					1										
INSPECTION AREAS:	OFFICE			OFFICE			OFFICE OFFICE			OFFICE OFFICE			OFFICE		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
BLINDS					1			1							

REMARKS:

works like 301 duty lt

SHT # 13





CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

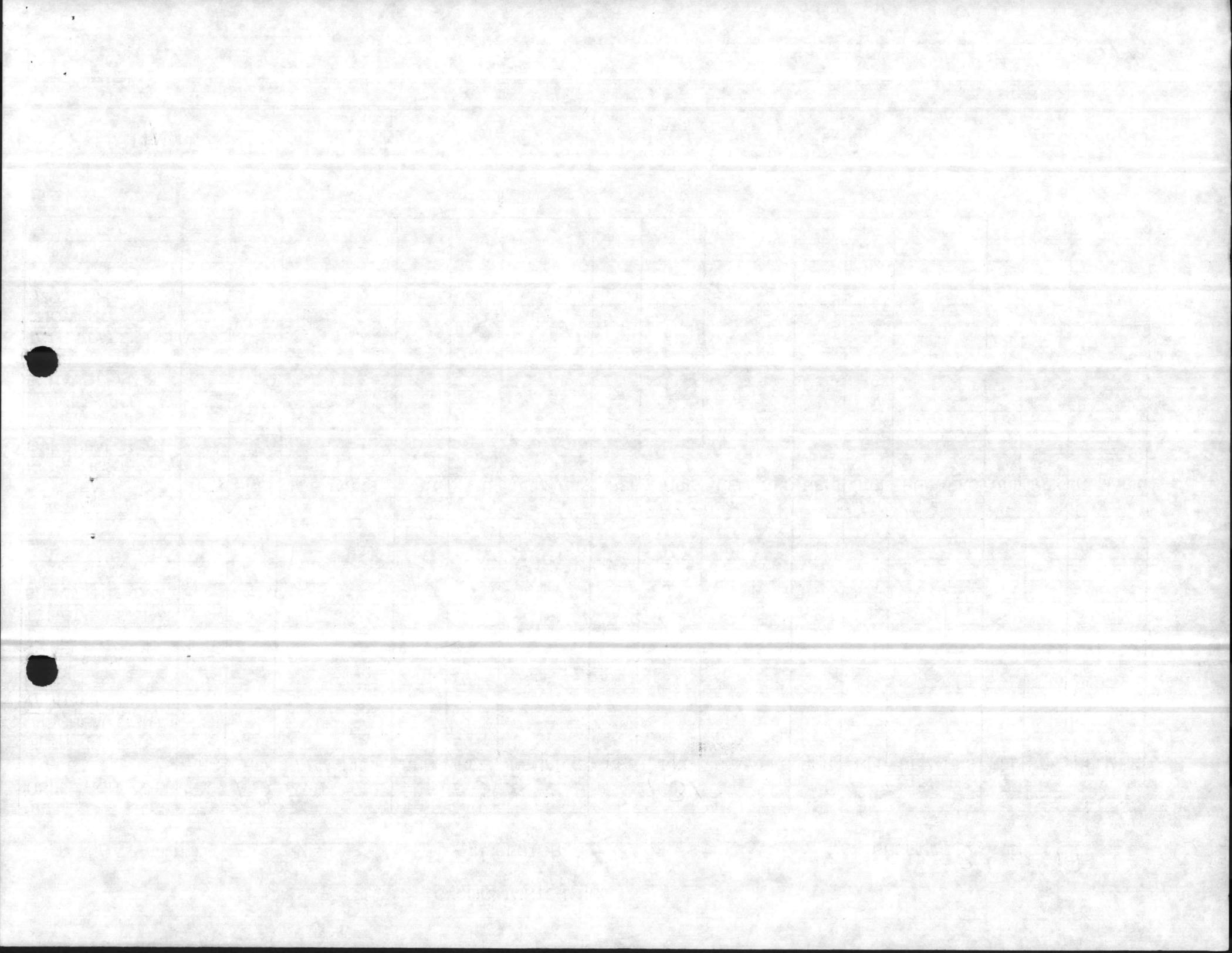
INSPECTOR VANKOSKY 10-7-89

SHEET # 3 OF 17

INSPECTION AREAS	135			133			131			OFFICE			OFFICE		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET									✓		RUNS CORRY				
TOILET PAPER HOLD.															
SHOWER HEAD		1			4					1					
DOOR LOCK					✓	COUSE									
18" TOWEL RACK										1					
INSPECTION AREAS:	OFFICE			OFFICE			OFFICE			OFFICE					
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT									✓		HEAD(2)				
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															
FAUCET									✓		LOW PRESSURE				

REMARKS:

SHT #15



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

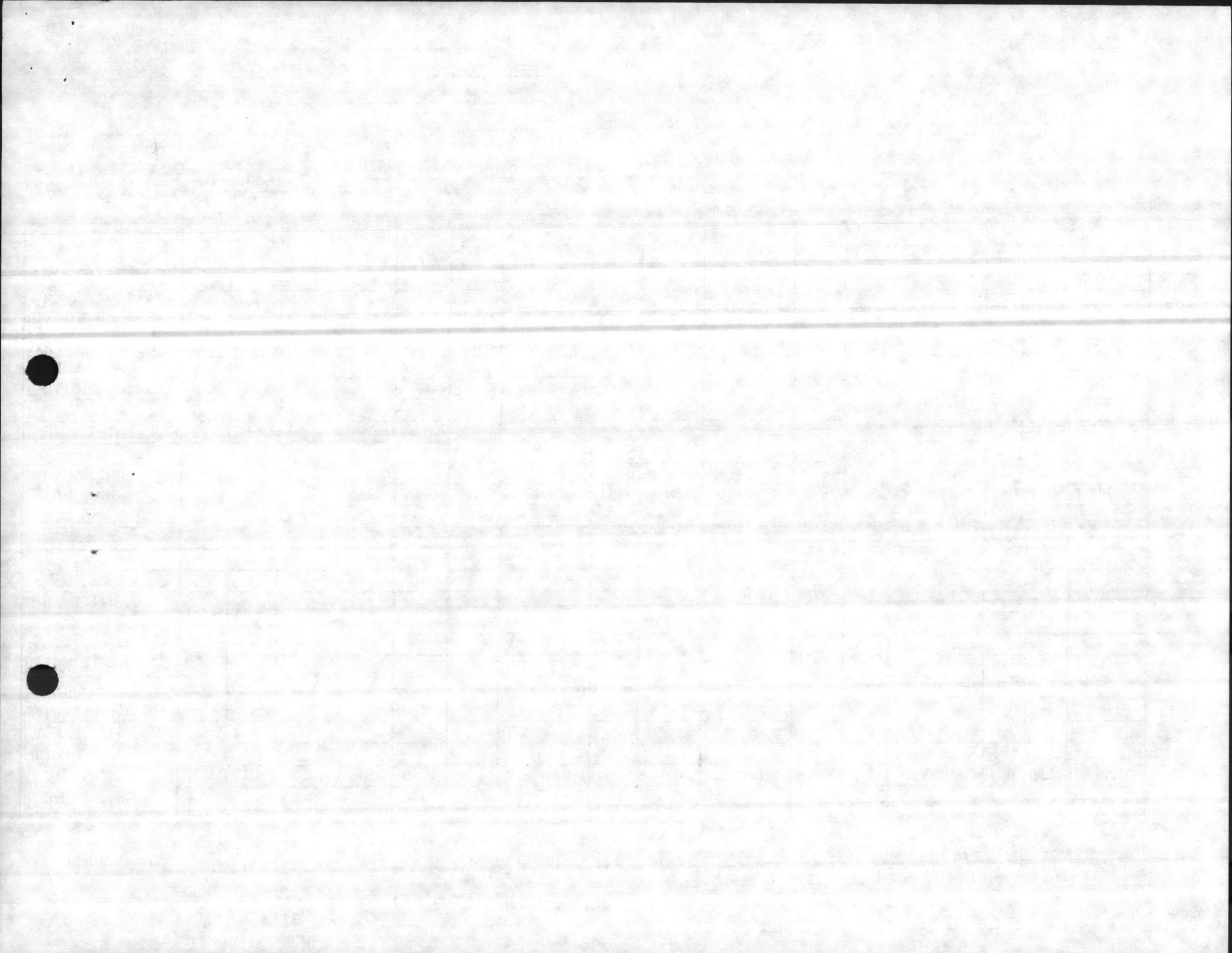
INSPECTOR YANKOSKI 10-7-99

SHEET # 4 OF 17

INSPECTION AREAS	OFFICE			OFFICE			OFFICE			105			103		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT										✓					
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN		PA			PM			PM							
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
AERATOR														1	
INSPECTION AREAS:	101														
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT	✓														
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
JELLY JAR LENS		1													
ENTRANCE ^{DOOR} KNOB	✓														

REMARKS:

SHT #16



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

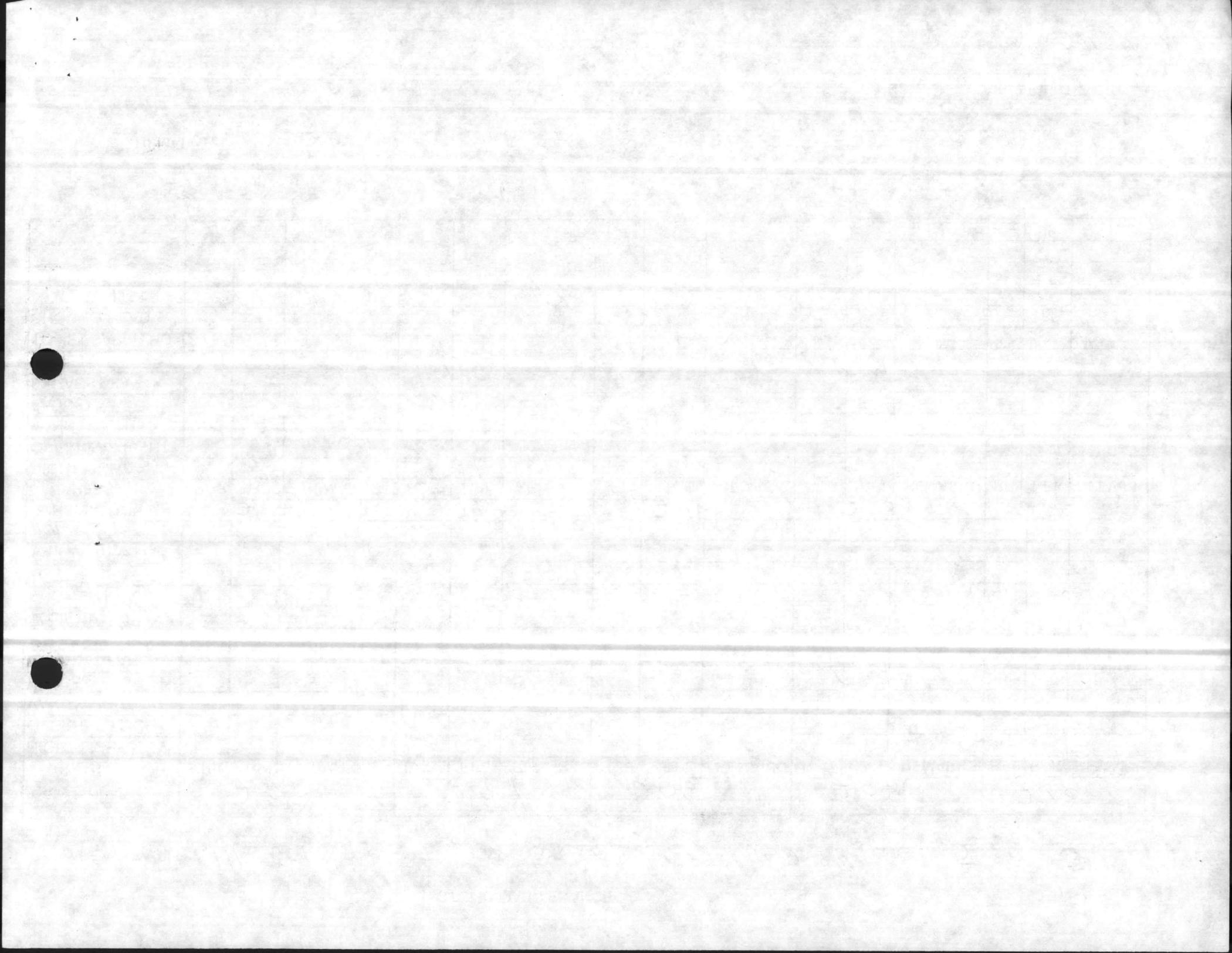
INSPECTOR YANKOSKY 10-7-99

SHEET # 5 OF 17

INSPECTION AREAS	202			204			206			208			210		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT	✓						✓								
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
GFF					4										
Smoke Detector							✓								
FAUCET							✓		LOW PRESSURE						
INSPECTION AREAS:	212			214			216			218			220		
NIGHT LIGHT	✓														
OVERHEAD LIGHT															
VANITY LIGHT	✓						✓								
FAUCET															
EXHAUST FAN															
TOLIET					P.M										
TOLIET PAPER HOLD.								4							
SHOWER HEAD		4													
PREP Hole		4													4

REMARKS:

SHT # 17



CYCLIC MAINTENANCE

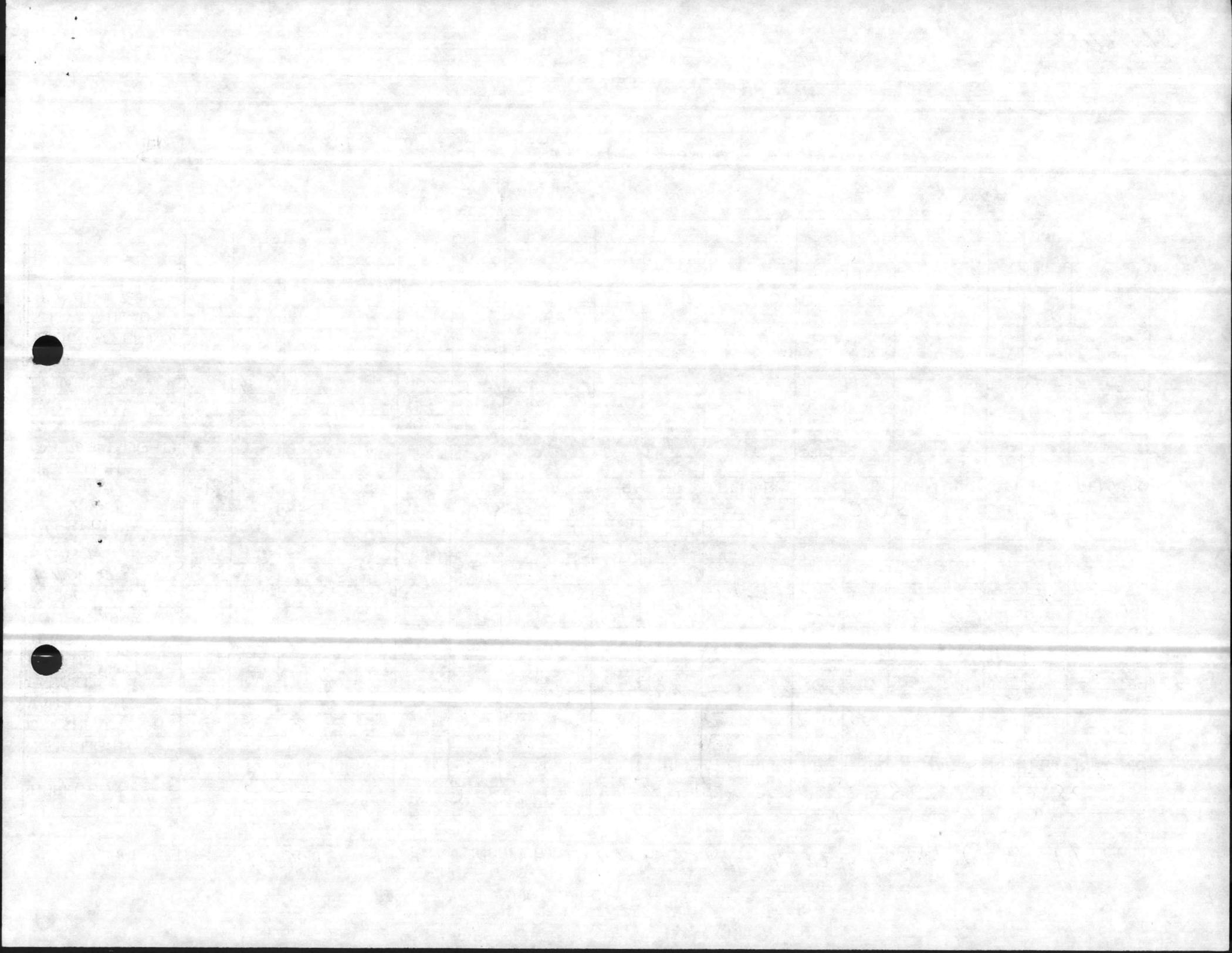
AREA & FACILITY: HP-301

INSPECTOR YANKOSKI 10-7-99 SHEET # 6 OF 17

INSPECTION AREAS	222			224			226			228			230		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															✓
OVERHEAD LIGHT															
VANITY LIGHT	✓														✓
FAUCET															
EXHAUST FAN															
TOILET						P.M									
TOILET PAPER HOLD.										✓		FLUSH			
SHOWER HEAD		I					✓		LEAKS						I
FAUCET	✓		STEM LEAKS												I
GFI								I							
OLLY JAR LEAKS												I			
INSPECTION AREAS:	232			234			236			235			233		
NIGHT LIGHT				✓											
OVERHEAD LIGHT															
VANITY LIGHT															✓
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD										✓		LEAKS			I
FAUCET							✓		LOW PRESSURE						

REMARKS: _____

SHT #18



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

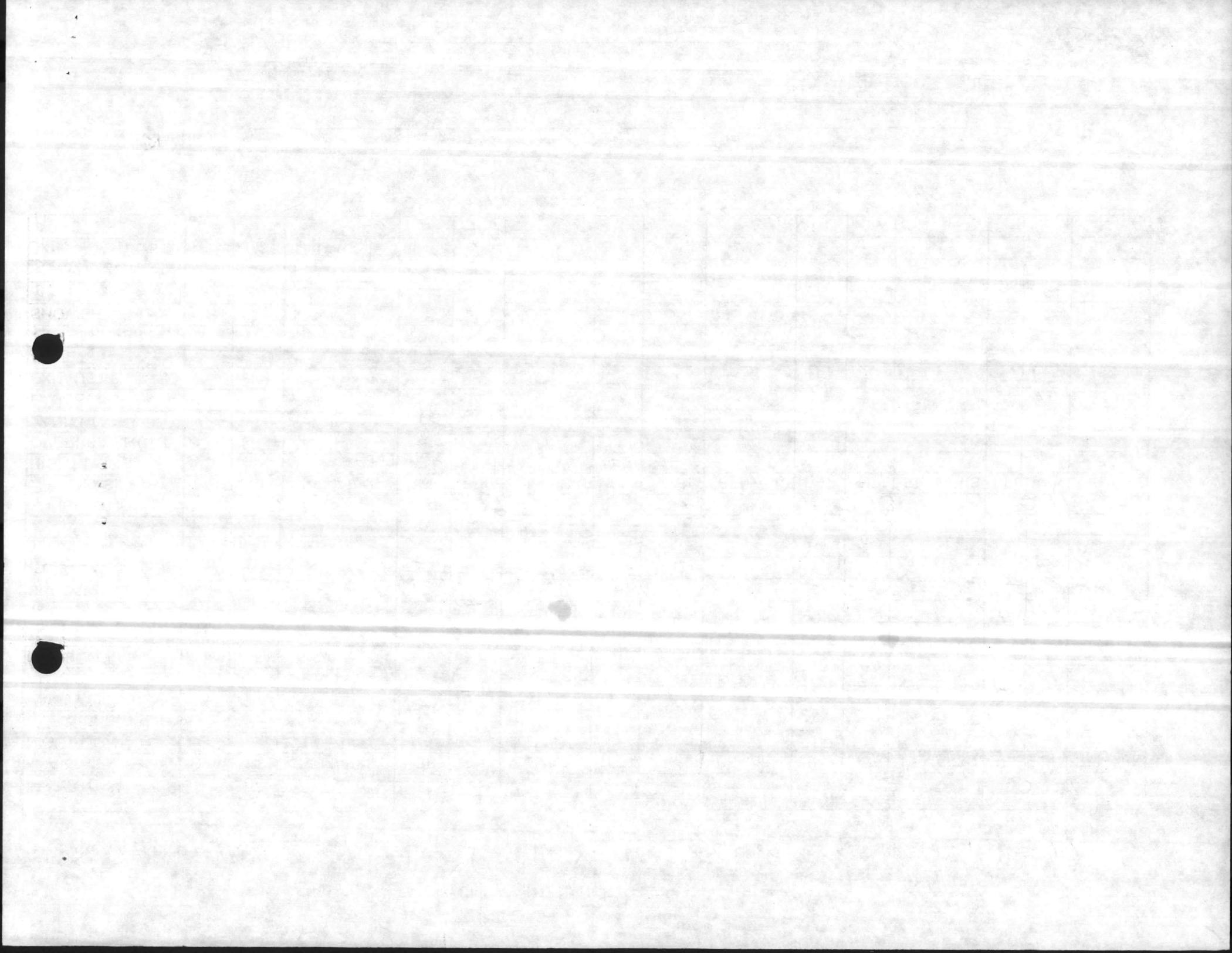
INSPECTOR YANKOSKY 10-7-89

SHEET # 7 OF 17

INSPECTION AREAS	231			227			225			223			221		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT	✓														
OVERHEAD LIGHT															
VANITY LIGHT					1	FLUORES	✓			✓	2' FLOOR		L		2' FLOOR
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.					1										
SHOWER HEAD									✓				L		LEAKS
2 1/2" DOOR KNUR				✓		ENTRANCE									
JELLY JAR LENS											1				
INSPECTION AREAS:	219			217			215			213			211		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT							✓								
OVERHEAD LIGHT															
VANITY LIGHT	✓			✓						✓					
FAUCET															
EXHAUST FAN															P.M
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD					4						4				
DEHUMID GRILL	✓			✓											
SMOKE DETECTOR					4										
JELLY JAR LENS					4										
AERATOR					4										
FAUCET										✓					NO PRESSURE

REMARKS:

SHT #19



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

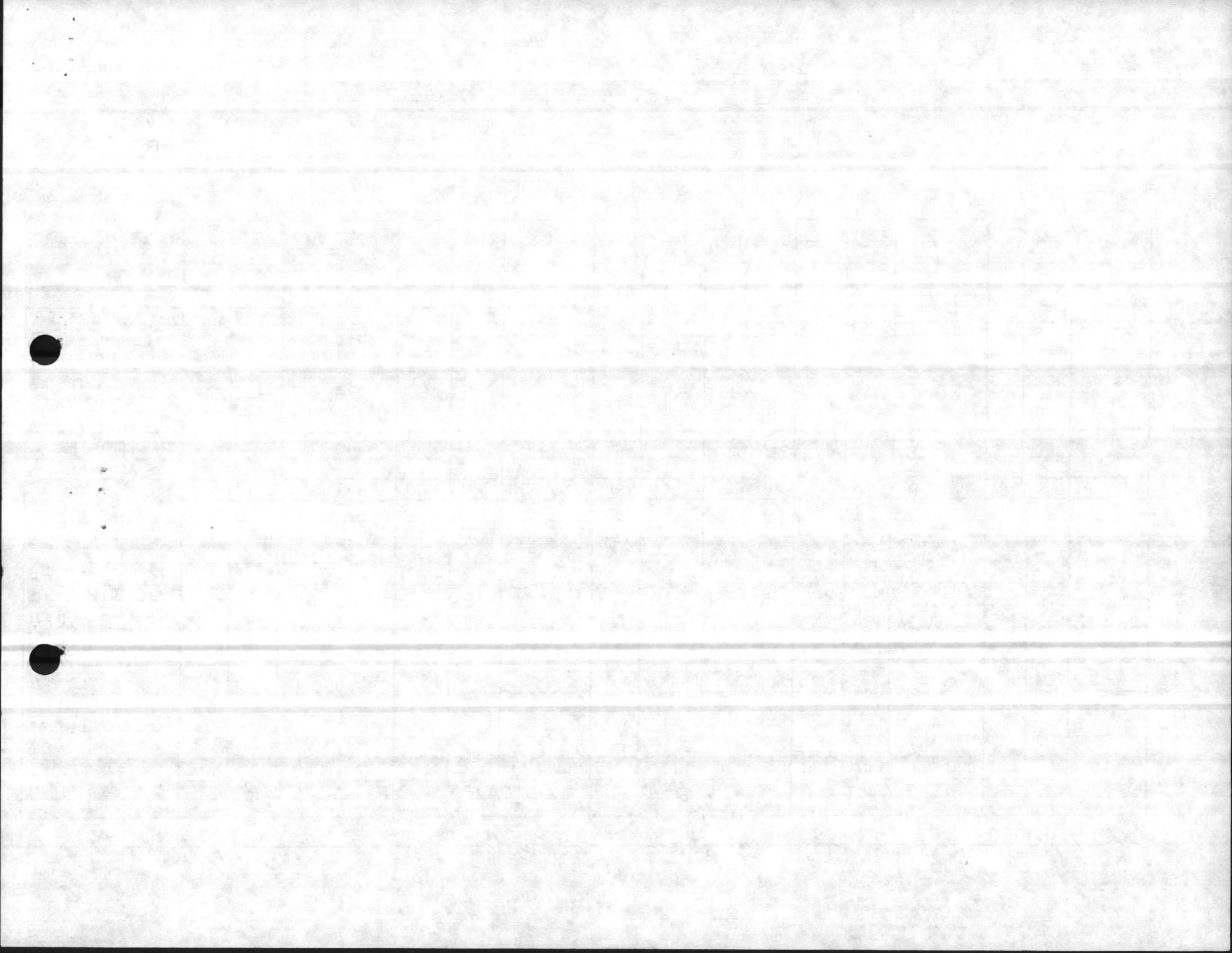
INSPECTOR YANTOSKY 10-7-99

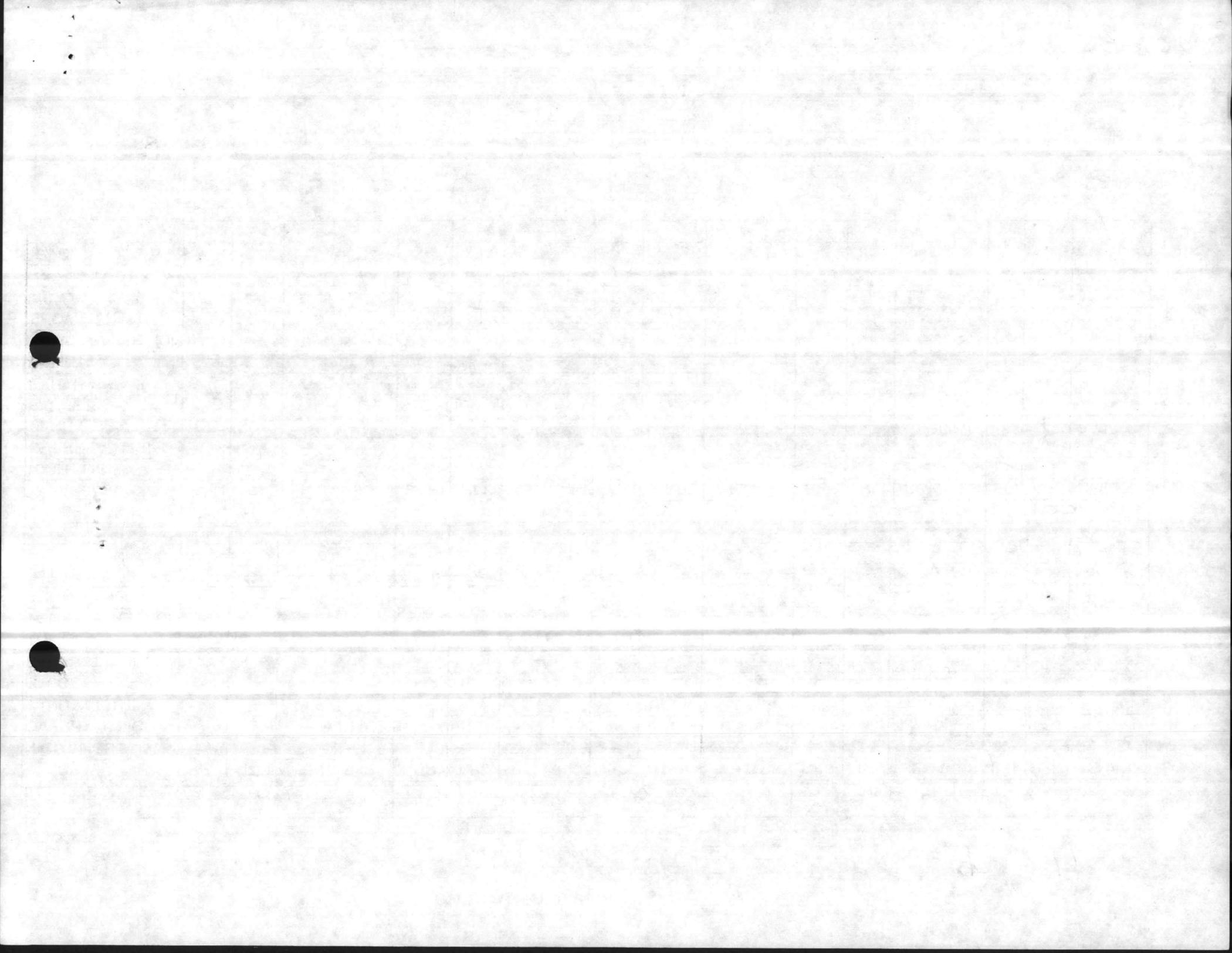
SHEET # 8 OF 17

INSPECTION AREAS	209			205			203			201					
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT	✓						✓								
FAUCET															
EXHAUST FAN															
TOILET						P.M									
TOILET PAPER HOLD.															
SHOWER HEAD							✓		LEAKS						
SHOWER VALVE															
INSPECTION AREAS:	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.															
SHOWER HEAD															

REMARKS:

541#20





1084

SGT STEVENSON (S. STEVENSON)

CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR YANKOSKY 10-7-99

SHEET # 10 OF 12

INSPECTION AREAS	324			326			328			330			332		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT				✓					NIGHT LIGHT SWITCH				✓		
OVERHEAD LIGHT															
VANITY LIGHT		1	2' FLOOR	✓		2' FLOOR					1	2' FLOOR			
FAUCET															
EXHAUST FAN		SHOWER	VALVE			GFI						GFI			FAULT
TOILET															NO HOT WATER
TOILET PAPER HOLD.												JELLY JAR			
SHOWER HEAD		1						1							
SMOKE DETECTOR		1													
SWITCH PLATE		1													
GFI COVER		1													
INSPECTION AREAS:	334			336			335			333			331		
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT		1	2' FLOOR												
FAUCET															
EXHAUST FAN															
TOILET															
TOILET PAPER HOLD.									P.M						
SHOWER HEAD		1				1									

REMARKS: _____

SHT #22

121



121



CYCLIC MAINTENANCE

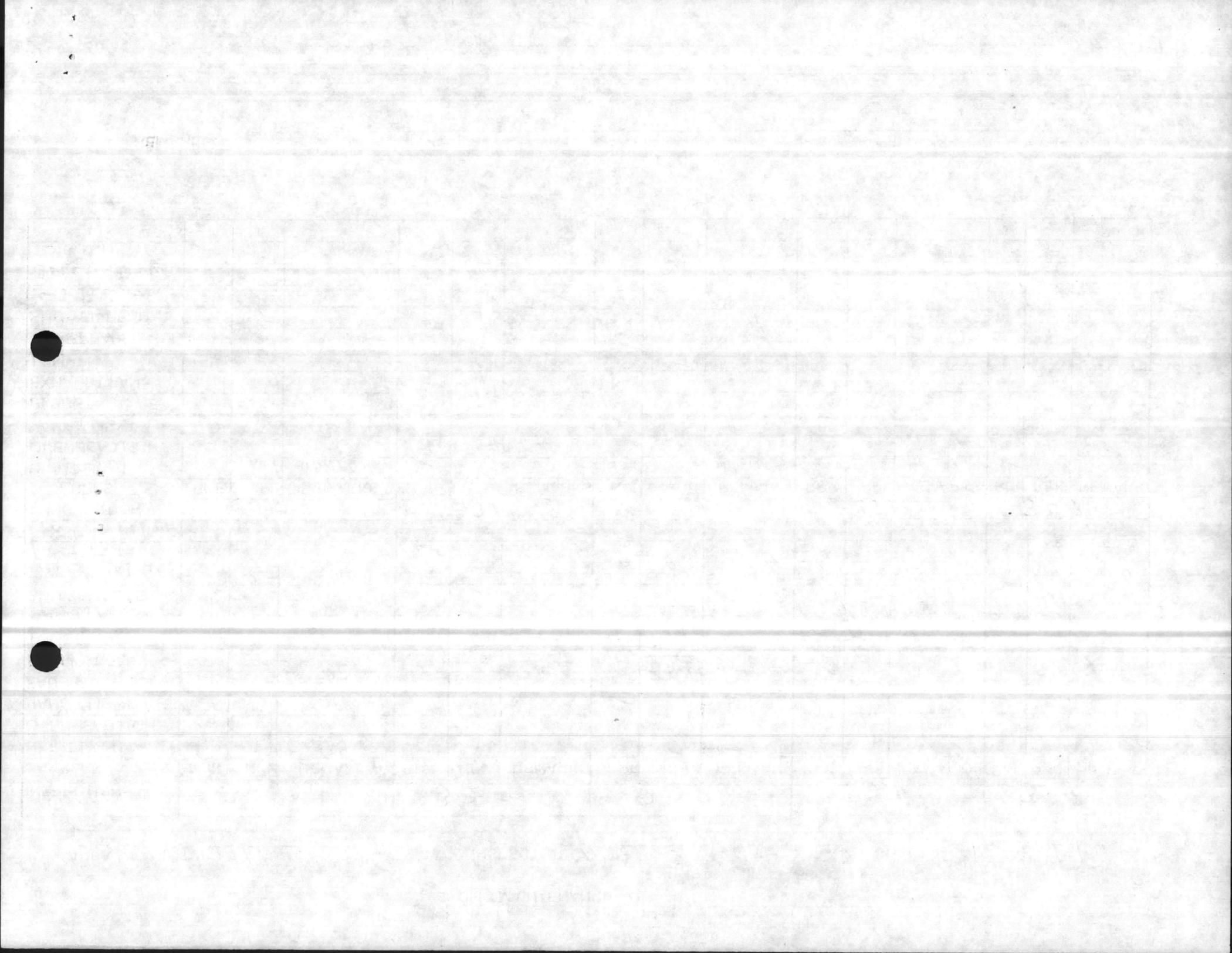
AREA & FACILITY: HP-301

INSPECTOR YANKOSKY 10-7-97 SHEET # 11 OF 17

INSPECTION AREAS	327			325			323			321			319		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT							✓		2/FLOOR					✓	
FAUCET															
EXHAUST FAN									BRILLE						
TOLIET									AC HANDLE						
TOLIET PAPER HOLD.															
SHOWER HEAD								4							
JELLY JAN WAS		4													
FAUCET				✓		STEM LEAKS									
18" TOWER					2										
INSPECTION AREAS:	317			315			313			311			309		
NIGHT LIGHT		4	SWITCH	✓										✓	
OVERHEAD LIGHT															
VANITY LIGHT							✓			✓					
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD					4										1
REF COVER							4								
JELLY JAN WAS								1							
SWITCH COVER											4				

REMARKS: _____

SHT #23



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

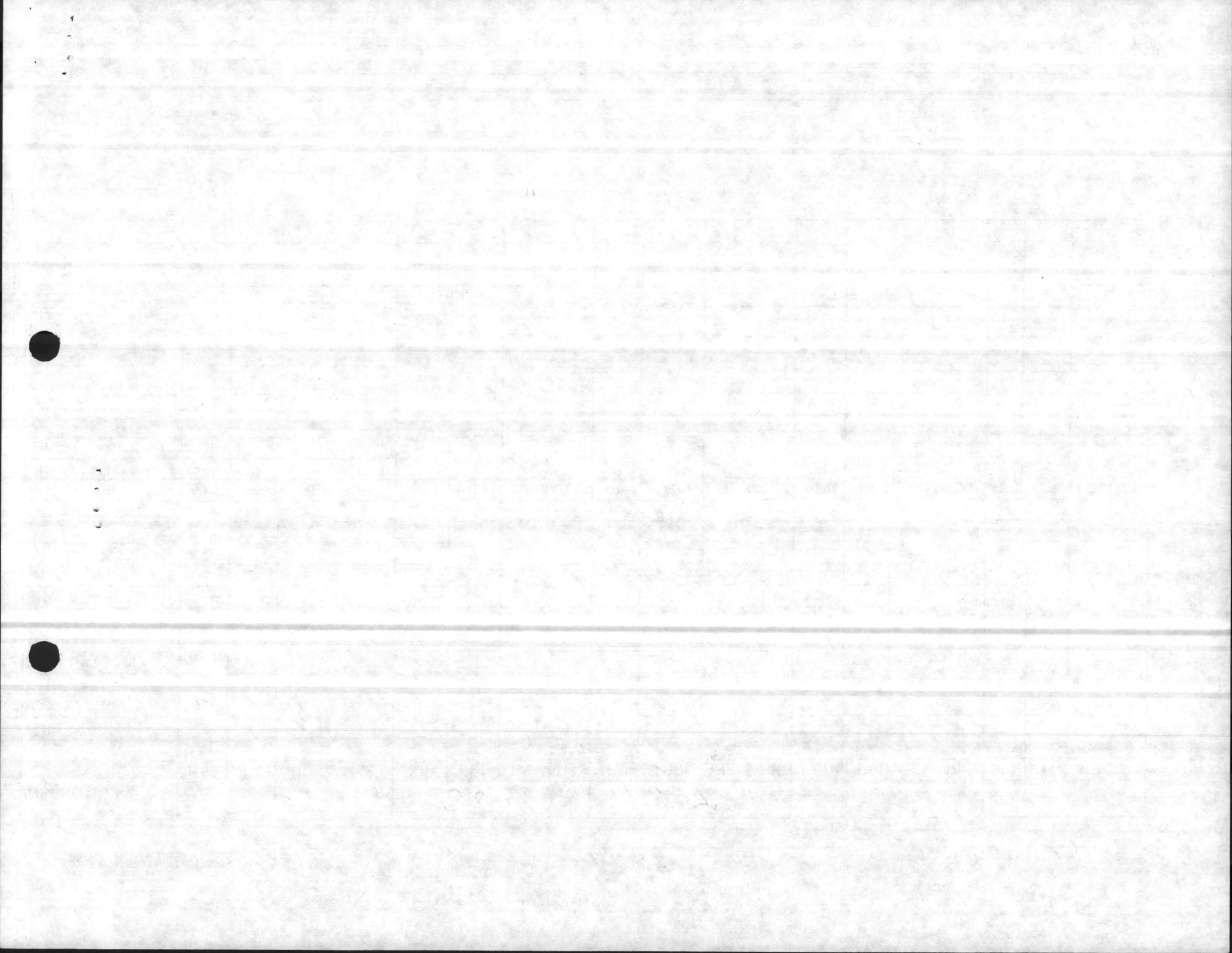
INSPECTOR YANUSKI 10-7-89

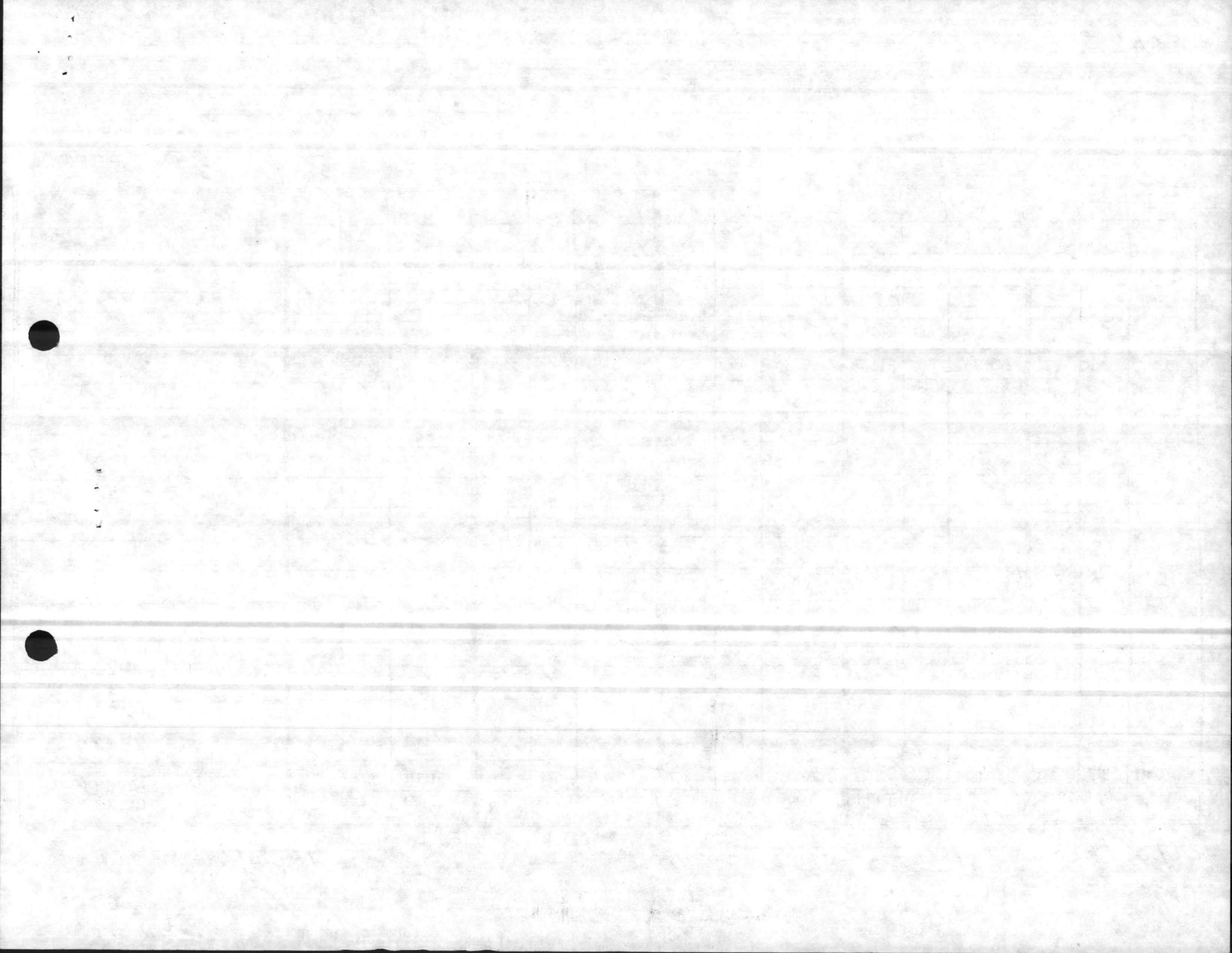
SHEET # 12 OF 17

INSPECTION AREAS	305			303			301								
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT	✓														
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
AERATOR		1													
TOLIET SEAT					1										
INSPECTION AREAS:															
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS:

SHT #24









GYOLIO MAINTENANCE

AREA & FACILITY: AP-361

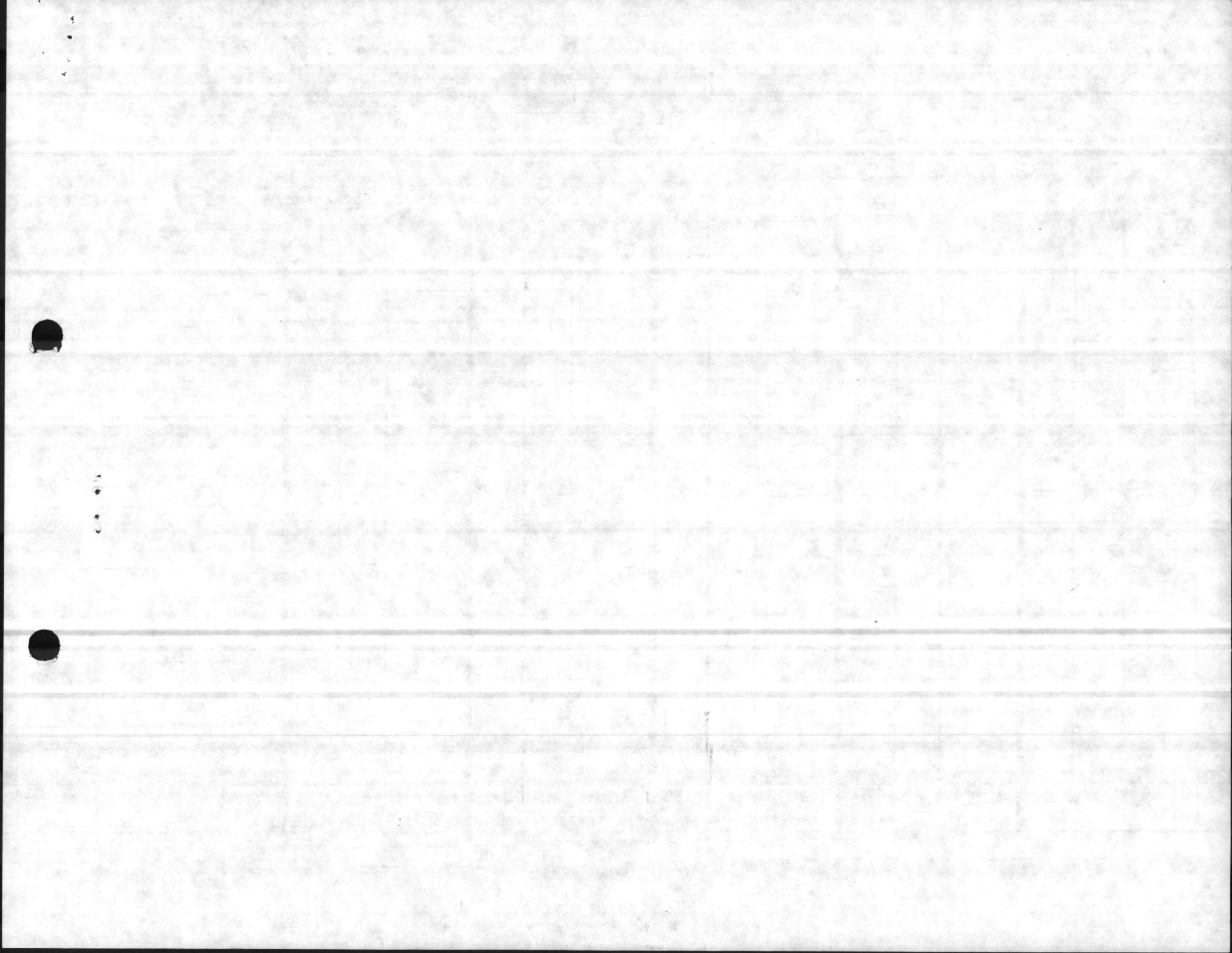
INSPECTOR: YANKOSKY 10-7-99

SHEET # 16 OF 17

INSPECTION AREAS:	Interior Stairwell			Exterior Stairwell			Exterior Lights			Exterior Exit Lights					
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS			
1ST OK															

REMARKS: _____

SH#28





DATE: 10/12/99

EPS JOB: HP 301

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

PAGE: 2

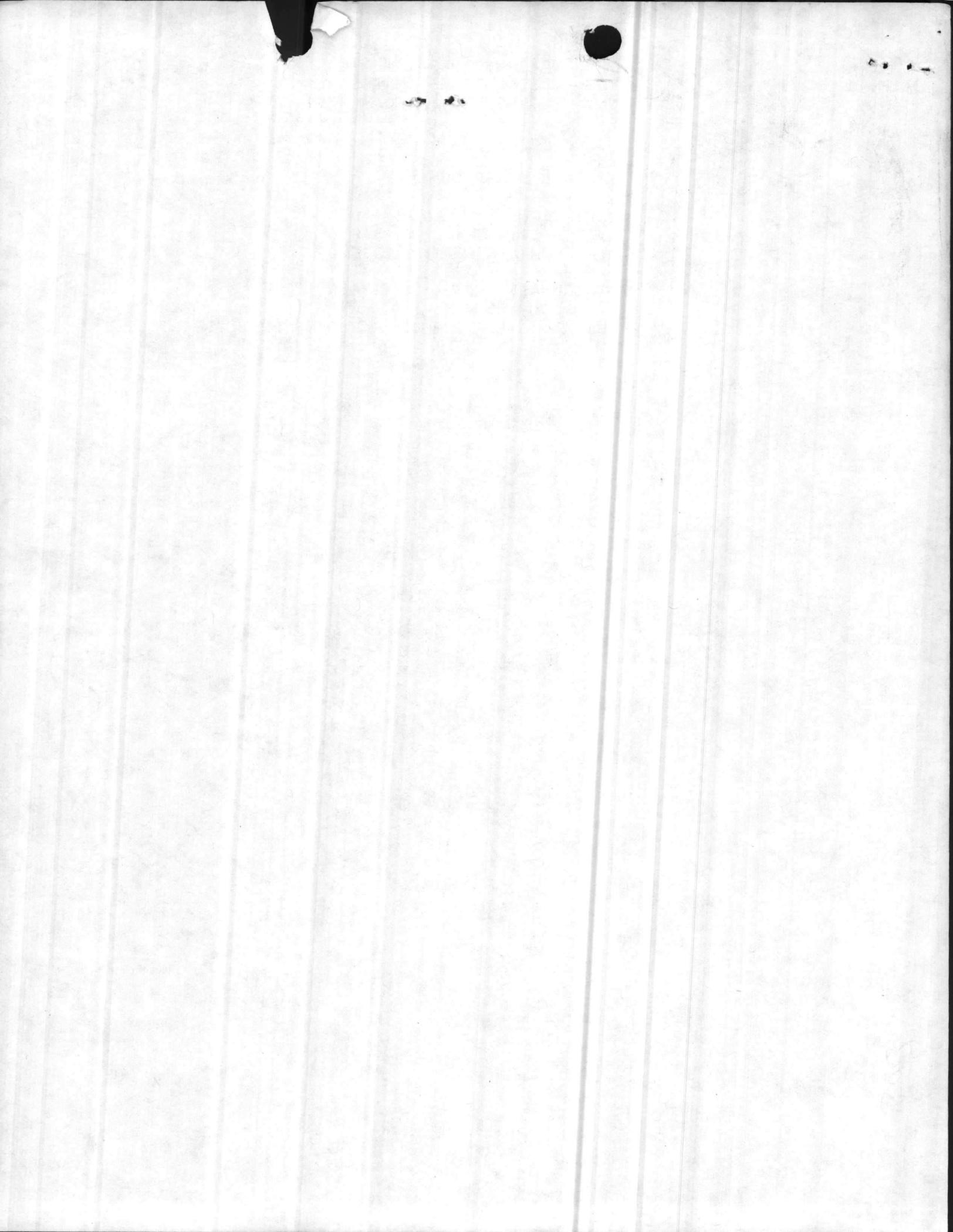
*** JOB PHASE SUMMARY ***

CRAFT TIME 0.0
TOTAL EPS TIME 0.0
TOTAL NON-EPS TIME 236.0

TOTAL PHASE TIME 236.0

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

EPS



BASE MAINTENANCE JOB ORDER

FY 01	AG/SAG	REQ. CODE		REQUEST # PM # 020		DIST. DATE - BY 10-26-00		FACILITY # HP-301	
AAC M67001	FA 23	WC	FC	OC/SOC	CAC	BRC	JN/LU EBG	RON	RBC
WGC	TYPE OF WORK REPAIR		PROJECT #		SKETCH	PLAN	SPECIAL INSTRUCTIONS CYCLIC MAINTENANCE		

FOR FURTHER INFORMATION CONTACT: JOHN YANKOSKY 451-0877 TICKET # 01-139587

GENERAL JOB DESCRIPTION: MISC. STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS

FOR ENTRY INTO BUILDING CONTACT : MYSGT SMITH 451-3390

START DATE: 11/27/00 NEED MATERIAL BY: 11/20/00

START DATE: 20 NOV 00 COMPLETE BY: COMPLETION DATE: 2-16-01
2-8-01

PHASE SEQUENCE		SUMMARY OF ESTIMATES						
PHASE NO.	WORK CTR	EST HRS	SHEET NO.	WORK CTR	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
1	41CG	51		41CG	51	1326	1172	2498
TOTALS					51	1326	1172	\$2,498.00

CONTINUED ON SH _0_ THRU _0_

PREPARED BY: JOHN YANKOSKY DATE: 10/19/00

REVIEWED BY: *[Signature]*

AUTHORIZED BY: *[Signature]* DATE: 10/25/00

SHEET _1_ OF _32_



DATE: 10/19/00

EPS JOB: HP 301

*** FEJE - DETAILED ESTIMATES ***
*** PHASE SUMMARY SHEET ***

PAGE: 1

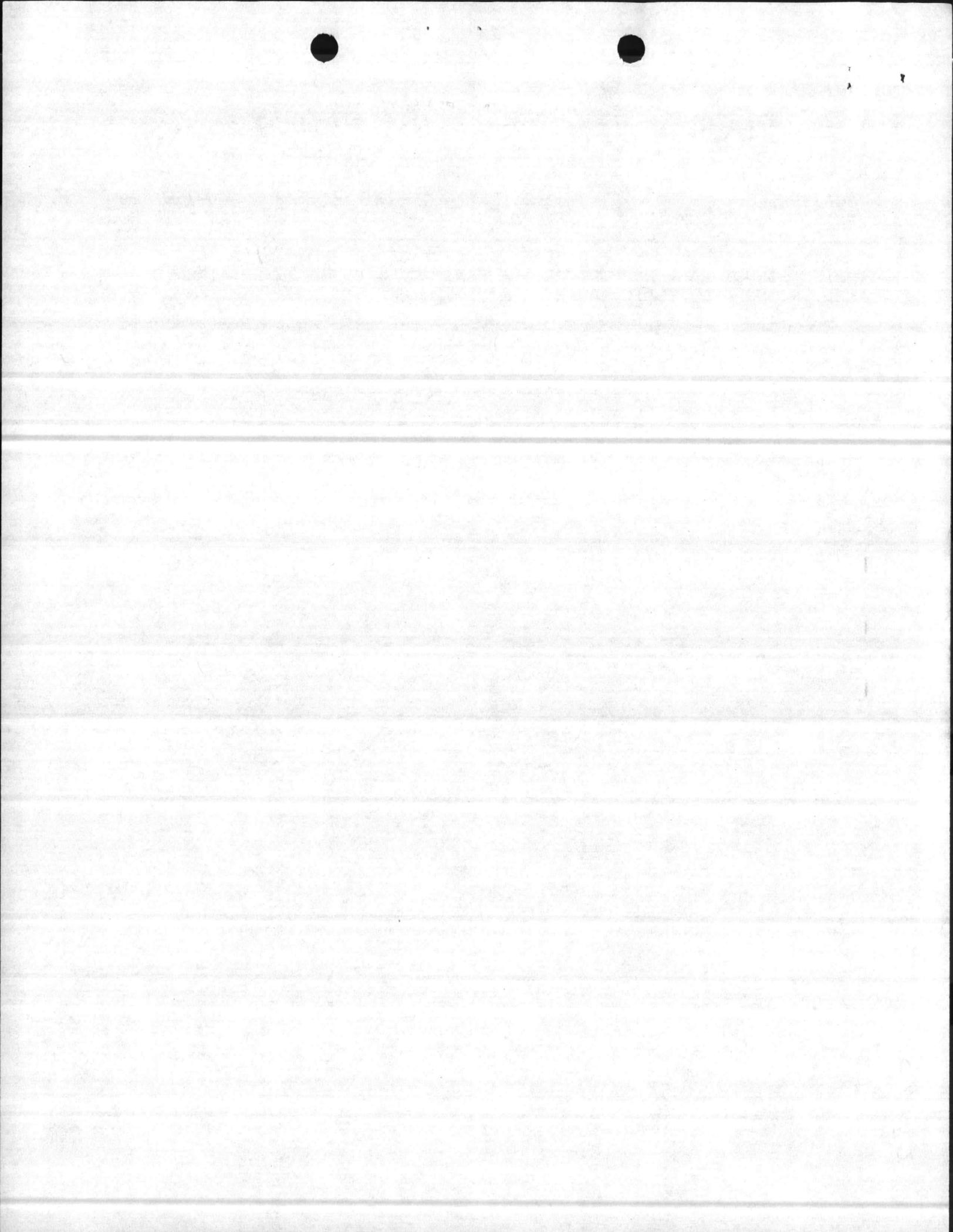
*** PHASE DESCRIPTIONS ***

CRAFT/PHASE	JOB/IFS	WORK CENTER	CRAFT NAME	BLDG/ FACILITY	EST HOURS
1	1/1	41CG	COMPANY CONCEPT CARPENTER MISC STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS.	HP-301	0

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

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

SHT # 2



DATE: 00/10/19

EPS JOB: HP 301

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

PAGE: 1

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

①

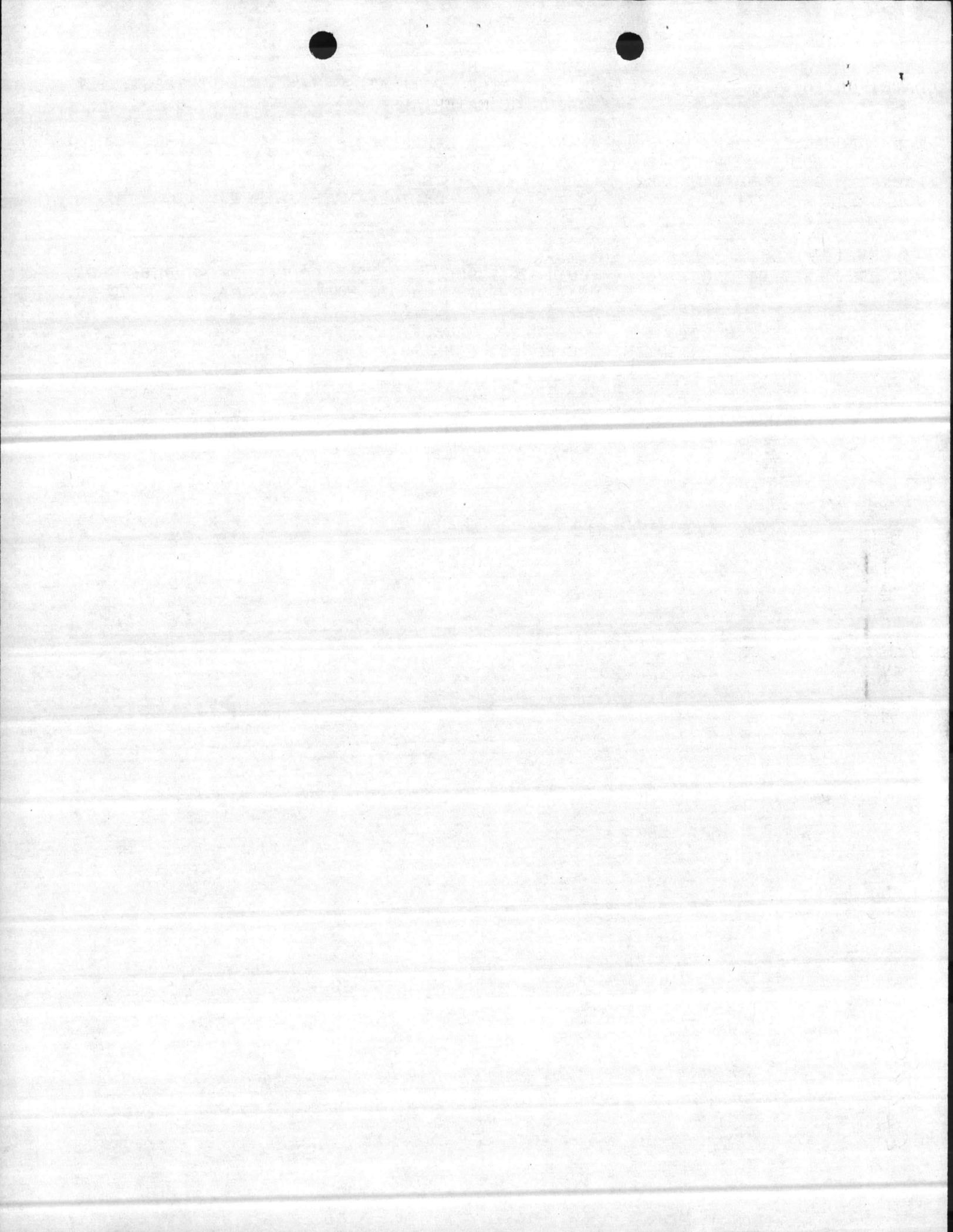
MCN-NSN: 6350-01-C00-17740 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LO
QUANTITY: 10 UNIT COST: 9.75 TOTAL COST: 97.50
LOCATION:

DESCRIPTION: SMOKE DETECTOR, 9V BATTERY BACKUP, BAT. INCLUDED
NOW CARRIED IN WARE HOUSE. SAME AS 4210-86-RAC-BATT
S/S IF WAREHOUSE IS OUT IS MADDUX 1-800-849-5506, LISA
MADDUX PART # 86 RAC.

SOS TOTAL COST: \$97.50

*** CONTINUED ON PAGE 2 ***

547#3



DATE: 00/10/19

EPS JOB: HP 301

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

PAGE: 2

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

②

MCN-NSN: 5340-3J-944-VIEW0 UNIT OF ISSUE: EA SOURCE OF SUPPLY: BPA
QUANTITY: 5 UNIT COST: 3.89 TOTAL COST: 19.45

LOCATION:
DESCRIPTION: VIEWER, DOOR, WIDE ANGLE, GRAINGER P/N 3J944
S/S GRAINGER
505 COVIL AVE.
WILMINGTON, NC.
1-910-762-3088

③

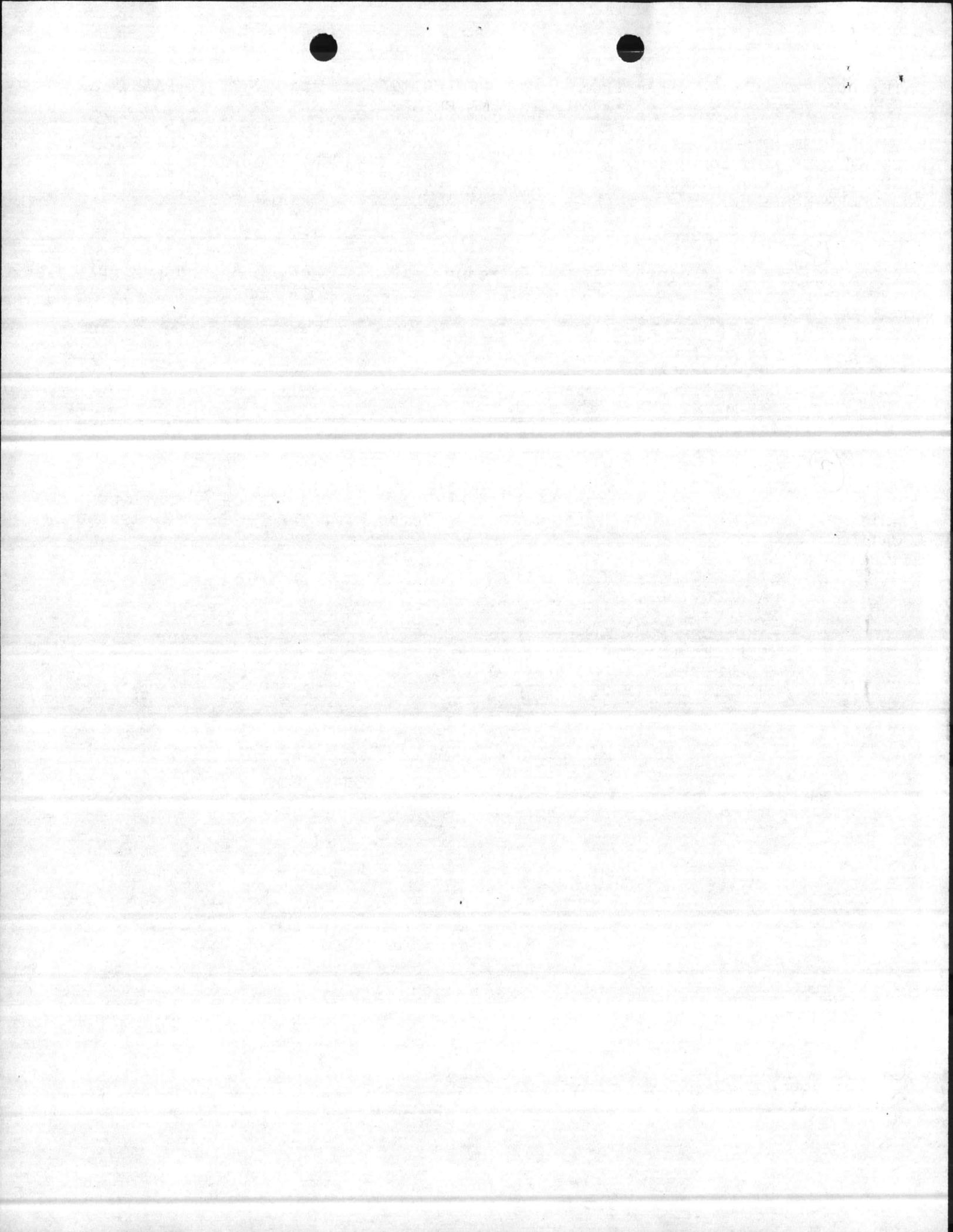
MCN-NSN: 6210-RB-792-RLM00 UNIT OF ISSUE: EA SOURCE OF SUPPLY: BPA
QUANTITY: 6 UNIT COST: 32.00 TOTAL COST: 192.00

LOCATION:
DESCRIPTION: LENS, P/N RB 79-2
S/S CRAVEN ELECTRIC
JACKSONVILLE, NC.
353-4643
MAKE SURE END CAPS ARE CLEAR PLASTIC.
WE RECEIVED SOME WITH WHITE PLASTIC END CAPS
AND THEY ARE ABOUT 1/8" TO LONG
OVERALL LENGTH 25 9/16"

SOS TOTAL COST: \$211.45

*** CONTINUED ON PAGE 3 ***

SHAH



DATE: 00/10/19

EPS JOB: HP 301

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

PAGE: 3

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

(4)

MCN-NSN: 6210-CR-AVF-21050 UNIT OF ISSUE: EA SOURCE OF SUPPLY: CR
QUANTITY: 4 UNIT COST: 34.00 TOTAL COST: 136.00
LOCATION:

DESCRIPTION: LENS COVER, FLUOR. 4 FT.
CRAVEN PART# F-2105
S/S CRAVEN ELECTRIC, JACKSONVILLE, N.C.
353-4643
USED FOR OFFICE SPACES IN HP-51,53& HP 185PASSAGEWAY

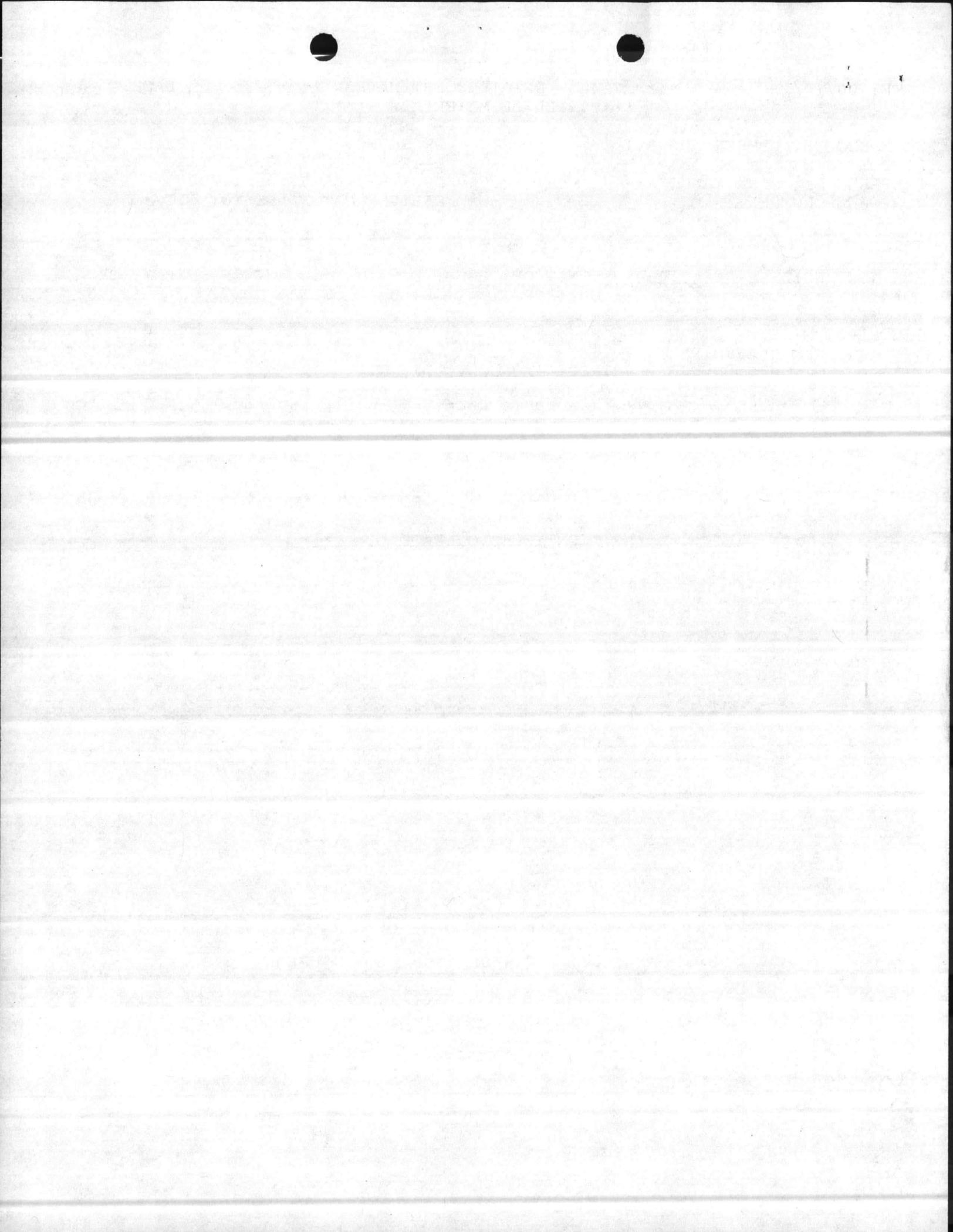
.
. .

SOS TOTAL COST: \$136.00

*** CONTINUED ON PAGE 4 ***

S

S



DATE: 00/10/19

EPS JOB: HP 301

*** FEJE - DETAILED ESTIMATES ***

PAGE: 4

*** BILL OF MATERIALS ***

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

(5)

MCN-NSN: 6210-02-FVS-00480 UNIT OF ISSUE: EA SOURCE OF SUPPLY: CRA
QUANTITY: 2 UNIT COST: 45.40 TOTAL COST: 90.80

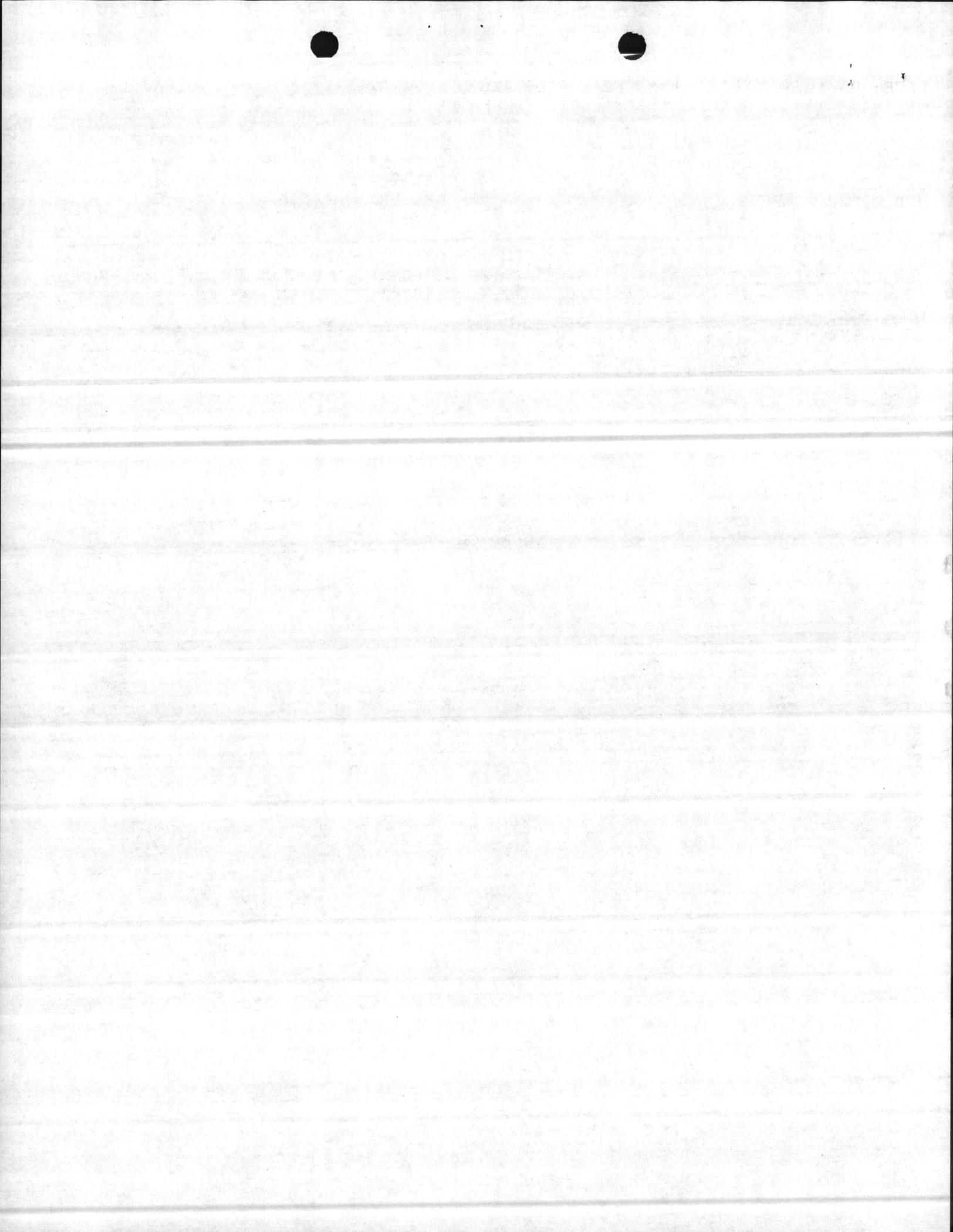
LOCATION:
DESCRIPTION: LENS, 4 FT. VAPOR,
CRAVEN PART# TLM FVS48
ORDERED FOR M-309
S/S CRAVEN ELECTRIC
PH # 353-4643

.
. .
. .

SOS TOTAL COST: \$90.80

*** CONTINUED ON PAGE 5 ***

S4T-#C



DATE: 00/10/19

EPS JOB: HP 301

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

PAGE: 5

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

(6)

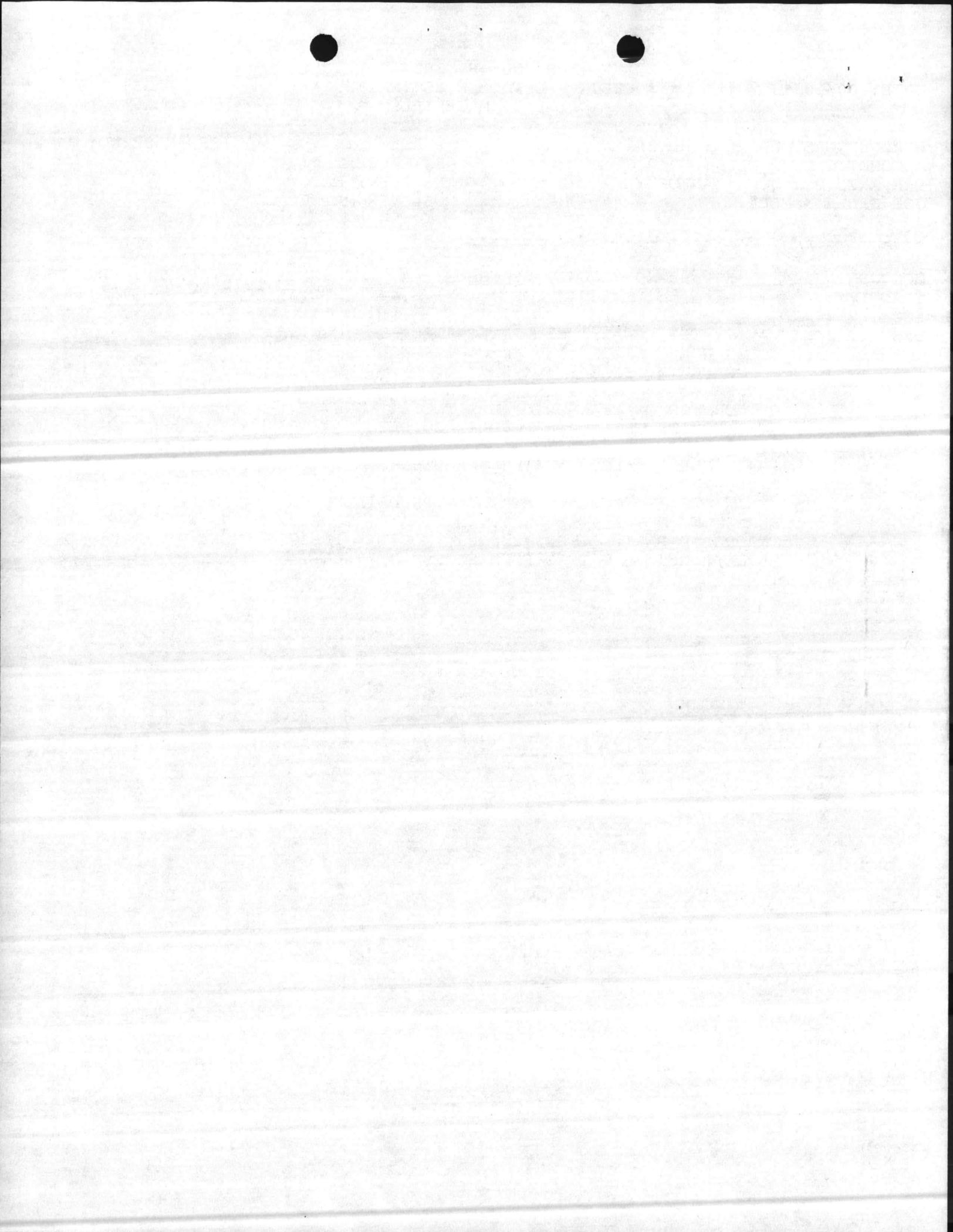
MCN-NSN: 7150-37-X22-SWAN0 UNIT OF ISSUE: EA SOURCE OF SUPPLY: FER
QUANTITY: 1 UNIT COST: 175.44 TOTAL COST: 175.44
LOCATION:

DESCRIPTION: VANITY TOP, SWANSTONE, INTEGRATED BOWL, CENTER.
COLOR, BONE, PREDRILLED 4" CENTER HOLES
FOR FAUCETS, SIZE 37" X 22"
S/S FERGUSON, 353-9088, CHUCK
OPTION TOP IS TRANSOLID BUT IT COST MORE
.S/S FOR TRANSOLID IS LONGLEY SUPPLY
455-3311
IHRIE SUPPLY ALSO CARRIES SWANSTONE
1-800-277-0188
KEVIN SEE IF YOU CAN GET THESE PREDRILLED FOR 4"CENTERS.
SWANSTONE MODEL#VTIB-2237, INTEGRATED BOWL 22 X 37, BONE
TRANSOLID PART# 71TB037220003, MODEL # ITB3722, BONE
KEVIN/ROGER DRAW THIS FROM EXCESS 3/23/00

SOS TOTAL COST: \$175.44

*** CONTINUED ON PAGE 6 ***

CHAS



DATE: 00/10/19

EPS JOB: HP 301

*** FEJE - DETAILED ESTIMATES ***

PAGE: 6

*** BILL OF MATERIALS ***

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

7

MCN-NSN: 4510-01-037-43780 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 5 UNIT COST: 5.85 TOTAL COST: 29.25
LOCATION:
DESCRIPTION: BAR, TOWEL, STAINLESS STEEL, W/SCREW IN WALL PLATES,
BAR 3/4" SQUARE X 24" LONG.

8

MCN-NSN: 4510-01-C00-06710 UNIT OF ISSUE: PR SOURCE OF SUPPLY: LOC
QUANTITY: 3 UNIT COST: 4.90 TOTAL COST: 14.70
LOCATION:
DESCRIPTION: HOLDER, TOILET TISSUE, CHROME, P/N 632 SEACHROME.

9

MCN-NSN: 5930-01-C00-78860 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 5 UNIT COST: .53 TOTAL COST: 2.65
LOCATION:
DESCRIPTION: SWITCH, TOGGLE, 1 POLE, SNGL THROW, 15A, 120V, SCR TERM,

10

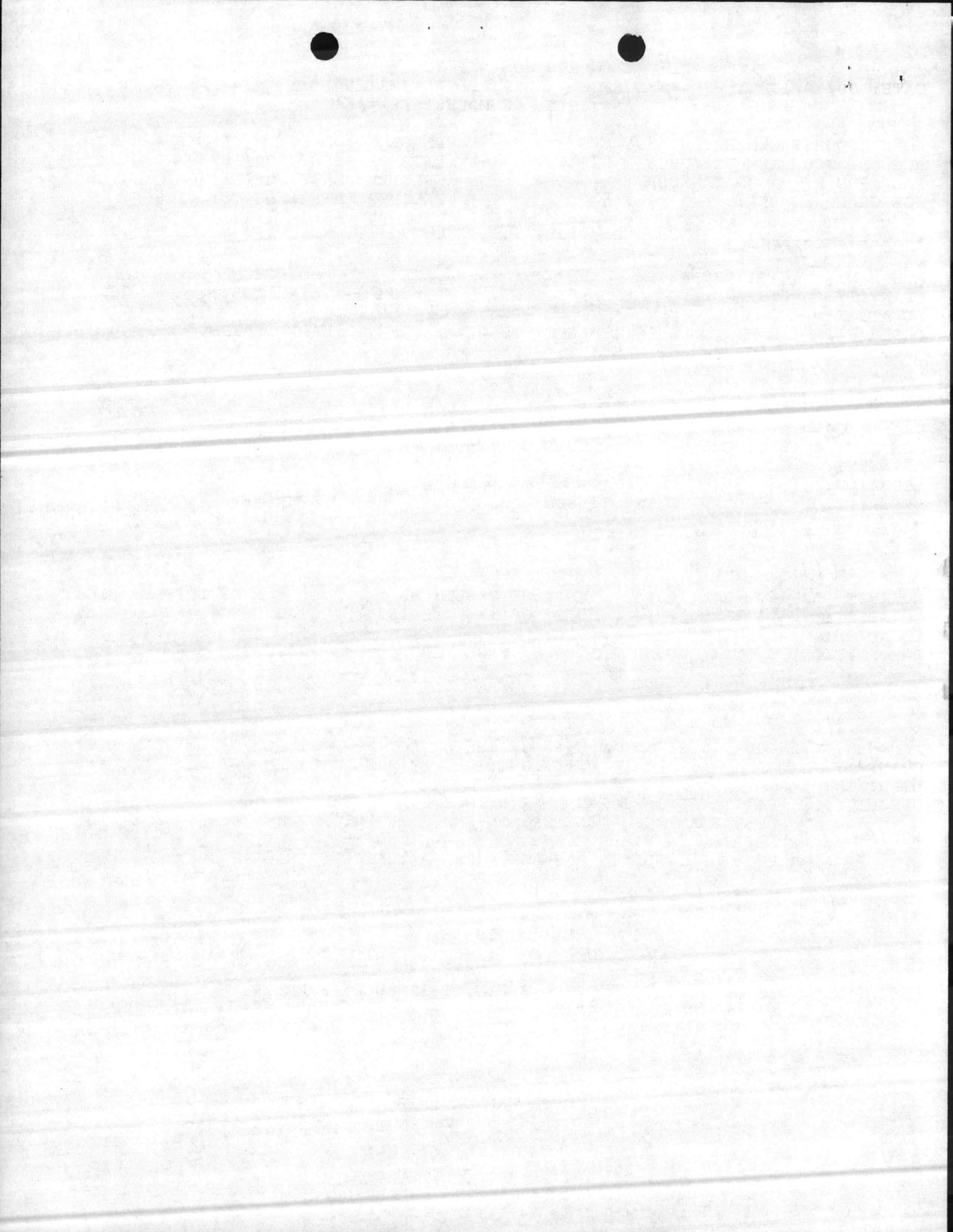
MCN-NSN: 6135-00-900-21390 UNIT OF ISSUE: PG SOURCE OF SUPPLY: LOC
QUANTITY: 6 UNIT COST: 7.81 TOTAL COST: 46.86
LOCATION:
DESCRIPTION: BATTERY 9V, RECTANGULAR WITH 2 SNAP PINS
USED FOR BACKUP BATTERY ON SMOKE DETECTORS
CARRIED IN WAREHOUSE
UNIT OF ISSUE IS PACKAGE, (12 BATTERIES/PACKAGE)

11

MCN-NSN: 6240-00-299-72500 UNIT OF ISSUE: EA SOURCE OF SUPPLY: LOC
QUANTITY: 12 UNIT COST: 2.35 TOTAL COST: 28.20
LOCATION:
DESCRIPTION: LAMP, FLUOR, 20W, MED BIPIN, T-12 BULB, WARM WHITE,
PREHEAT START, 24"

*** CONTINUED ON PAGE 7 ***

SHT#8



DATE: 00/10/19

EPS JOB: HP 301

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

PAGE: 7

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

(12)

MCN-NSN: 6240-01-004-31070	UNIT OF ISSUE: BX	SOURCE OF SUPPLY: LOC
QUANTITY: 1	UNIT COST: 34.20	TOTAL COST: 34.20

LOCATION:
DESCRIPTION: LAMP, FLOUR, MED BIPIN, T-12 BULB, COOL WHITE 35W,
T-BULB STYLE, 48" LONG. 30 PER BOX.

(13)

MCN-NSN: 6240-01-157-51140	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: LOC
QUANTITY: 20	UNIT COST: .29	TOTAL COST: 5.80

LOCATION:
DESCRIPTION: LAMP, INCAND, 130V, 90W, NED SCR BASE, A-19
WHITE LIGHT, P/N 100A-90WM (SYLVANIA)

(14)

MCN-NSN: 6240-01-306-82470	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: LOC
QUANTITY: 20	UNIT COST: 2.40	TOTAL COST: 48.00

LOCATION:
DESCRIPTION: LAMP, FLUOR, 7W, BIPIN BASE, P L BULB 5-5/16" L, F/USE
WITH PREHEAT BALLAST ONLY.

(15)

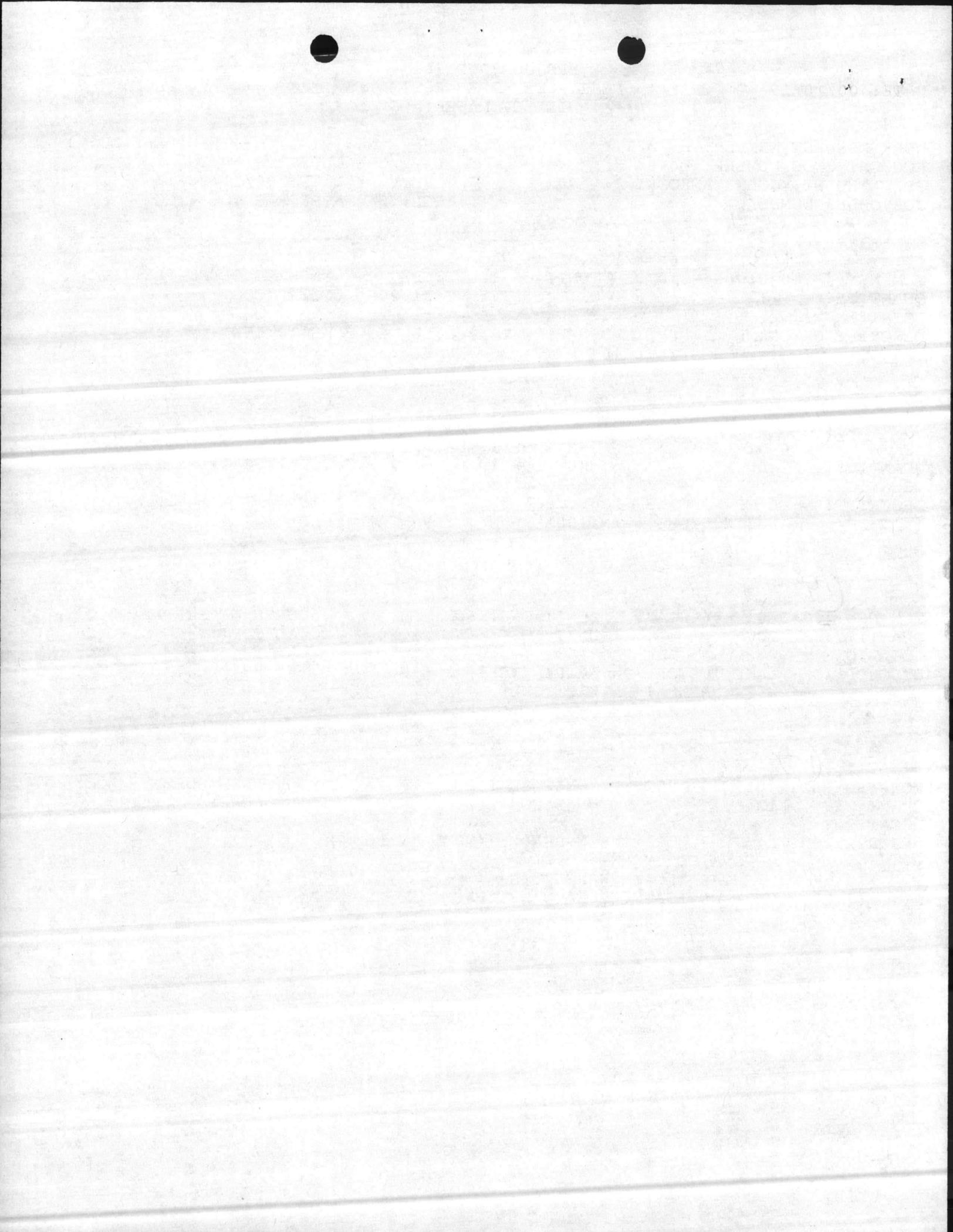
MCN-NSN: 6240-01-C00-18320	UNIT OF ISSUE: EA	SOURCE OF SUPPLY: LOC
QUANTITY: 12	UNIT COST: 10.80	TOTAL COST: 129.60

LOCATION:
DESCRIPTION: LAMP, FLUOR, T-8 U-SHAPED, (USED IN LOUNGE)
RENOVATED BY MWR.
S/S CARRIED IN WAREHOUSE
UNIT OF ISSUE IS EACH BUT PACKAGED 12 TO A CASE

SOS TOTAL COST: \$339.26

*** CONTINUED ON PAGE 8 ***

SHT#9



DATE: 00/10/19

EPS JOB: HP 301

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

PAGE: 8

WORK REQUEST NUMBER: HP 301
ACCOUNT CODE NUMBER: B048
PREPARED BY: JOHN YANKOSKY 0
JOB ORDER NUMBER:

PHASE NO: 1 IFS PHASE NO: 1
DATE CREATED: 00/10/19
DELIVERY DATE: 00/11/20
DELIVER MATERIALS TO: 41CG

(16)

MCN-NSN: 4510-P1-050-51000 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 5 UNIT COST: 12.03 TOTAL COST: 60.15
LOCATION:
DESCRIPTION: SHOWER HEAD, NEW TYPE FOR HP-51, WITH RUBBER INSERT HEADS
S/S PALMETTO, 1-800-830-0426
PART # P105-051

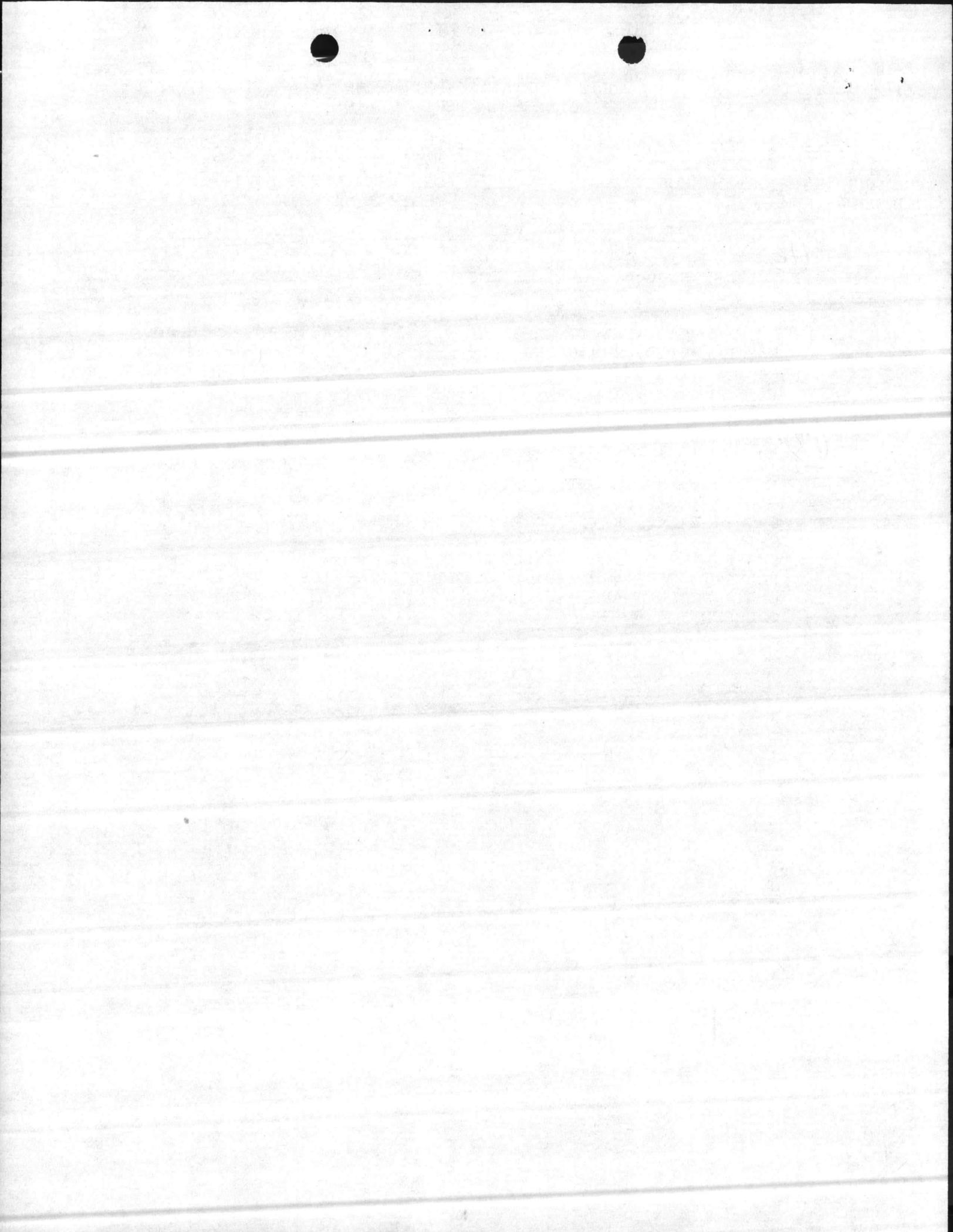
(17)

MCN-NSN: 4510-RP-199-1AST0 UNIT OF ISSUE: EA SOURCE OF SUPPLY: PAL
QUANTITY: 4 UNIT COST: 15.30 TOTAL COST: 61.20
LOCATION:
DESCRIPTION: SHOWER VALVE, KIT, CARTRIDGE FOR SHOWER VALVE
SPINNING PAST STOP.
S/S PALMETTO PARTS, 1-800-830-0426
PALMETTO PART # RP1991, CHANGED TO P099-109
DELTA SCALD GUARD
ORDERED FOR FC-360

SOS TOTAL COST: \$121.35

PHASE TOTAL COST: \$1171.80

SHT#18



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR YANKOSKY

SHEET # 1 OF

NOTE ~~*~~ **REPLACE BATTERYS IN ALL ROOM SMOKE DET.**

INSPECTION AREAS	ROOM # <u>102</u>			ROOM # <u>104</u>			ROOM # <u>106</u>			ROOM # <u>108</u>			ROOM # <u>OFFICE</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
<u>Smoke Detectors</u>						<u>1</u>									
INSPECTION AREAS:	ROOM # <u>OFFICE</u>			ROOM # <u>OFFICE</u>			ROOM # <u>OFFICE</u>			ROOM # <u>OFFICE</u>			ROOM # <u>OFFICE</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS: * NOTE: REPLACE ALL BATTERYS IN ROOM SMOKE DETECTORS

SHT # 11



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CYCLIC MAINTENANCE

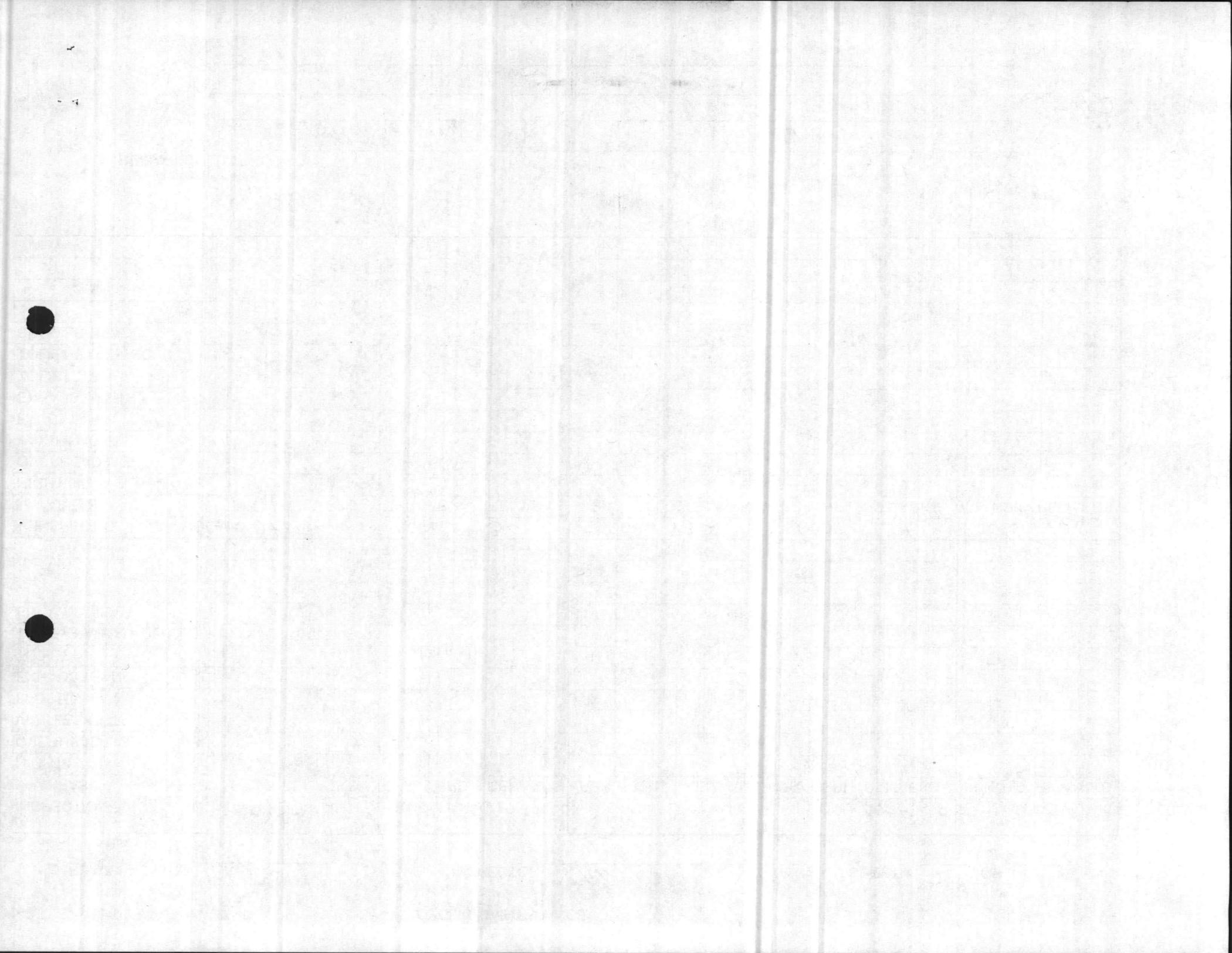
AREA & FACILITY: HP-301

INSPECTOR YANKOVSKY 10-19-00

SHEET # 2 OF _____

INSPECTION AREAS	ROOM # <u>OFFICE</u>														
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM # <u>OFFICE</u>			ROOM # <u>130</u>			ROOM # <u>132</u>			ROOM # <u>134</u>			ROOM # <u>136</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS: _____



CYCLIC MAINTENANCE

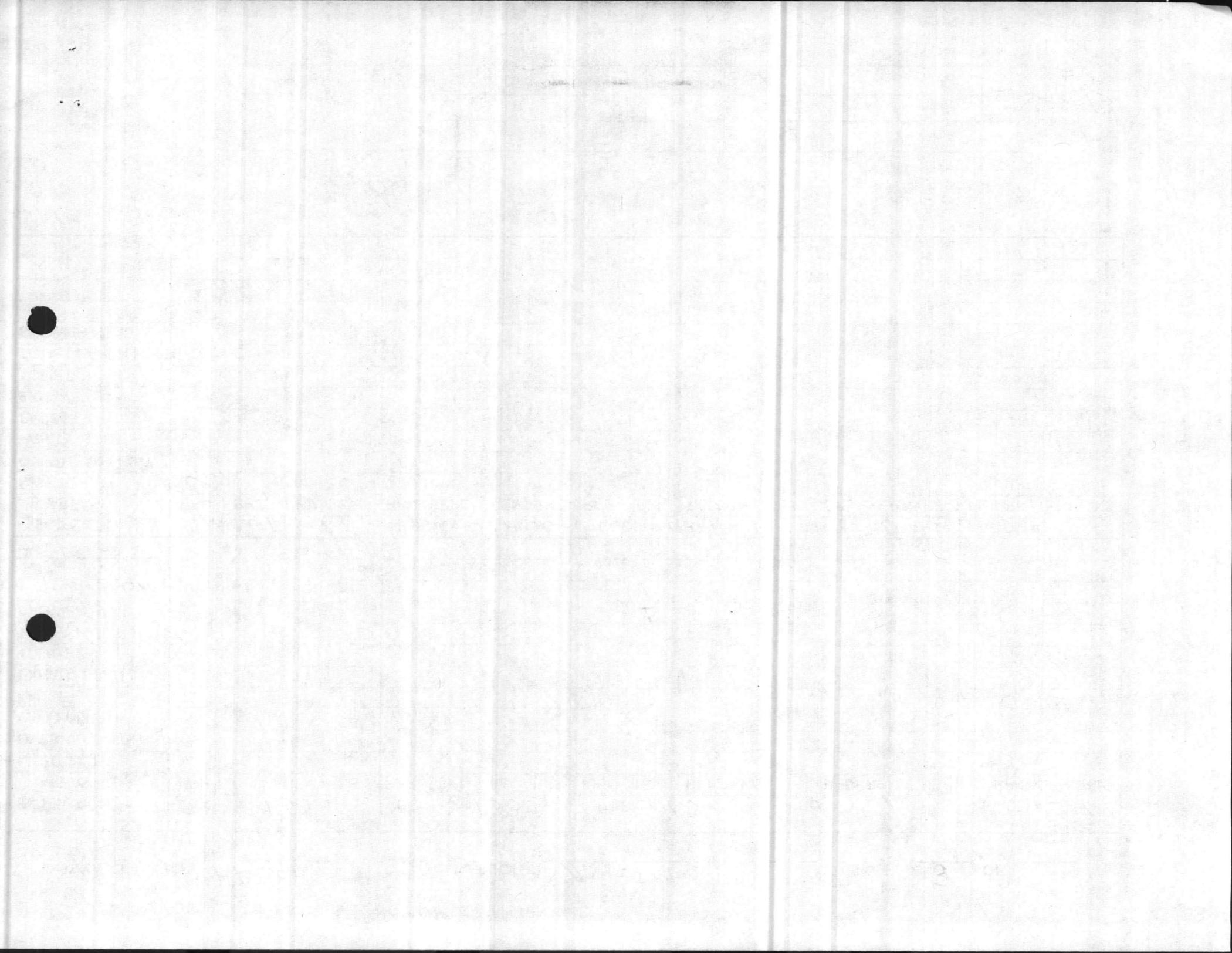
AREA & FACILITY: HP-301

INSPECTOR YANKOSKY

SHEET # 9 OF _____

INSPECTION AREAS	ROOM # <u>135</u>			ROOM # <u>133</u>			ROOM # <u>131</u>			ROOM # <u>Office</u>			ROOM # <u>Office</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT	✓														
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
<u>Towel BAR</u>															
INSPECTION AREAS:	ROOM # <u>Office</u>			ROOM #											
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT	✓														
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS: _____



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

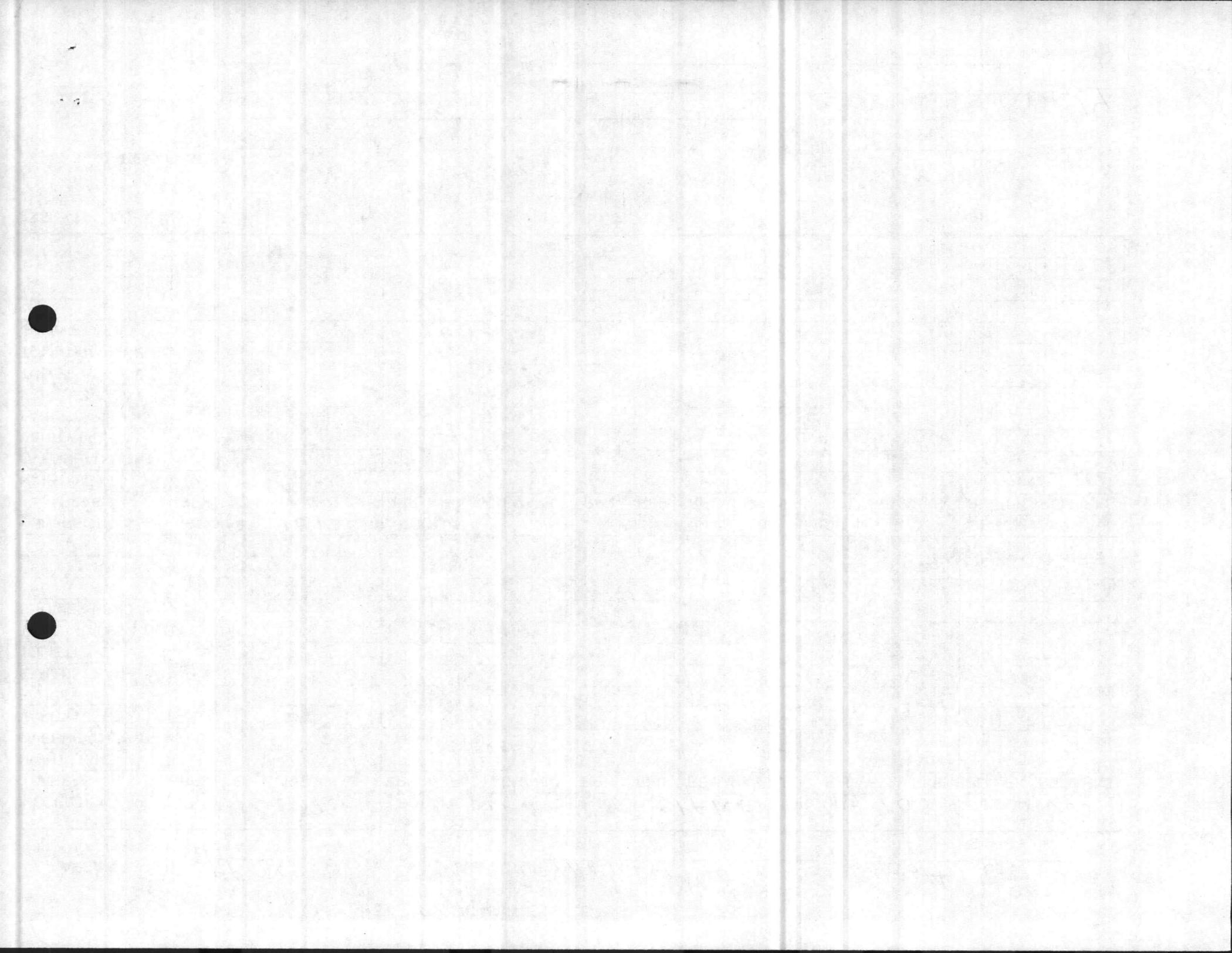
INSPECTOR YANTOSKY 10-18-00

SHEET # 4 OF _____

INSPECTION AREAS	ROOM # <u>Office</u>			ROOM # <u>Office</u>			ROOM # <u>OFFICE</u>			ROOM # <u>105</u>			ROOM # <u>103</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM # <u>101</u>			ROOM #			ROOM #			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS: _____

SHT # 14



CYCLIC MAINTENANCE

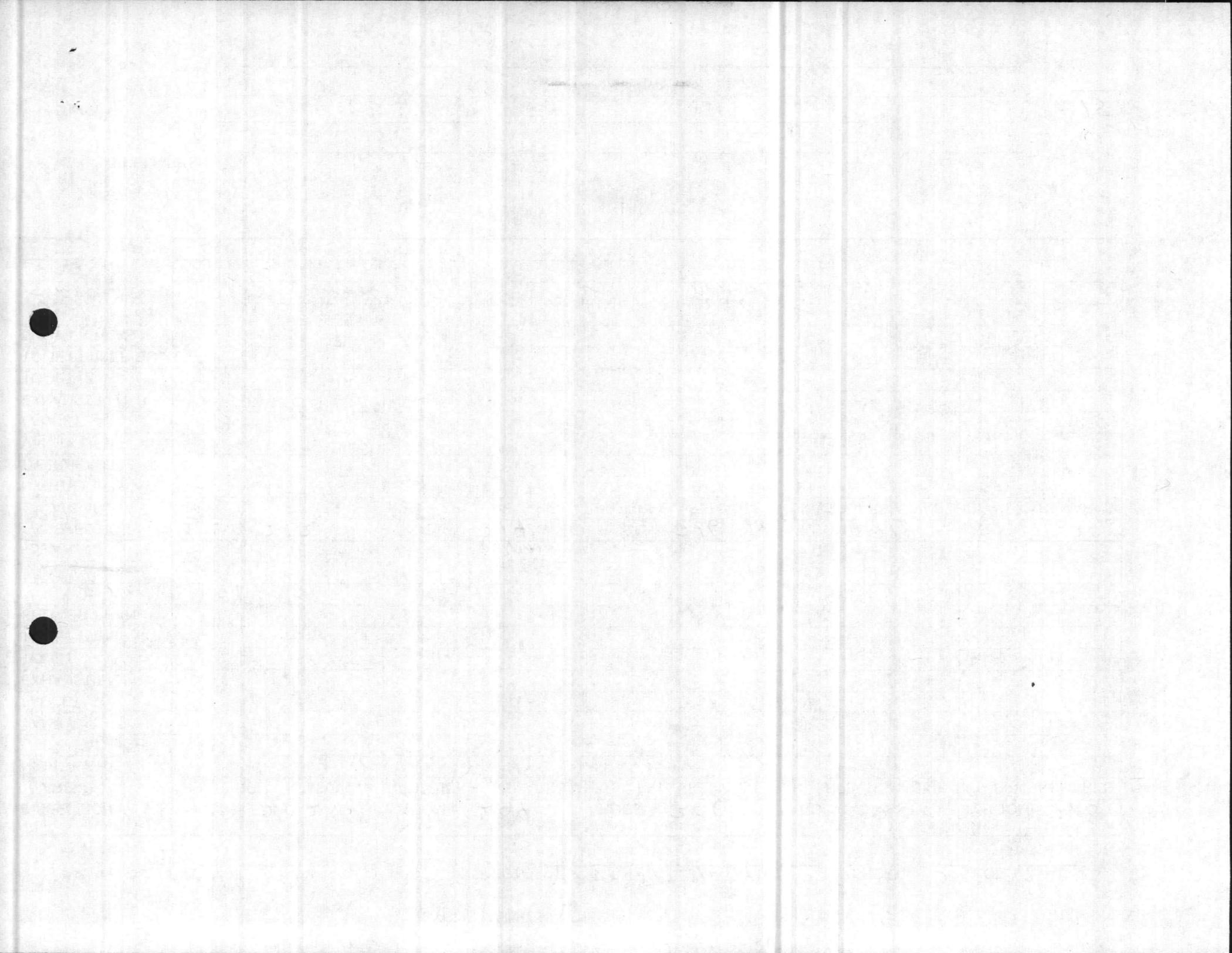
AREA & FACILITY: HP-301

INSPECTOR YANKOFF 10-19-00

SHEET # 5 OF _____

INSPECTION AREAS	ROOM # <u>202</u>			ROOM # <u>204</u>			ROOM # <u>206</u>			ROOM # <u>208</u>			ROOM # <u>210</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
<u>TOWEL BAR</u>		<u>4</u>													
<u>DOOR KNOB</u>															
<u>Shower</u>				<u>✓</u>		<u>SLOW DRAIN</u>									
INSPECTION AREAS:	ROOM # <u>212</u>			ROOM # <u>214</u>			ROOM # <u>216</u>			ROOM # <u>218</u>			ROOM # <u>220</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
<u>DOOR KNOB</u>				<u>✓</u>						<u>✓</u>		<u>SLOW DRAIN</u>	<u>✓</u>		
<u>SINK</u>							<u>✓</u>								

REMARKS:



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

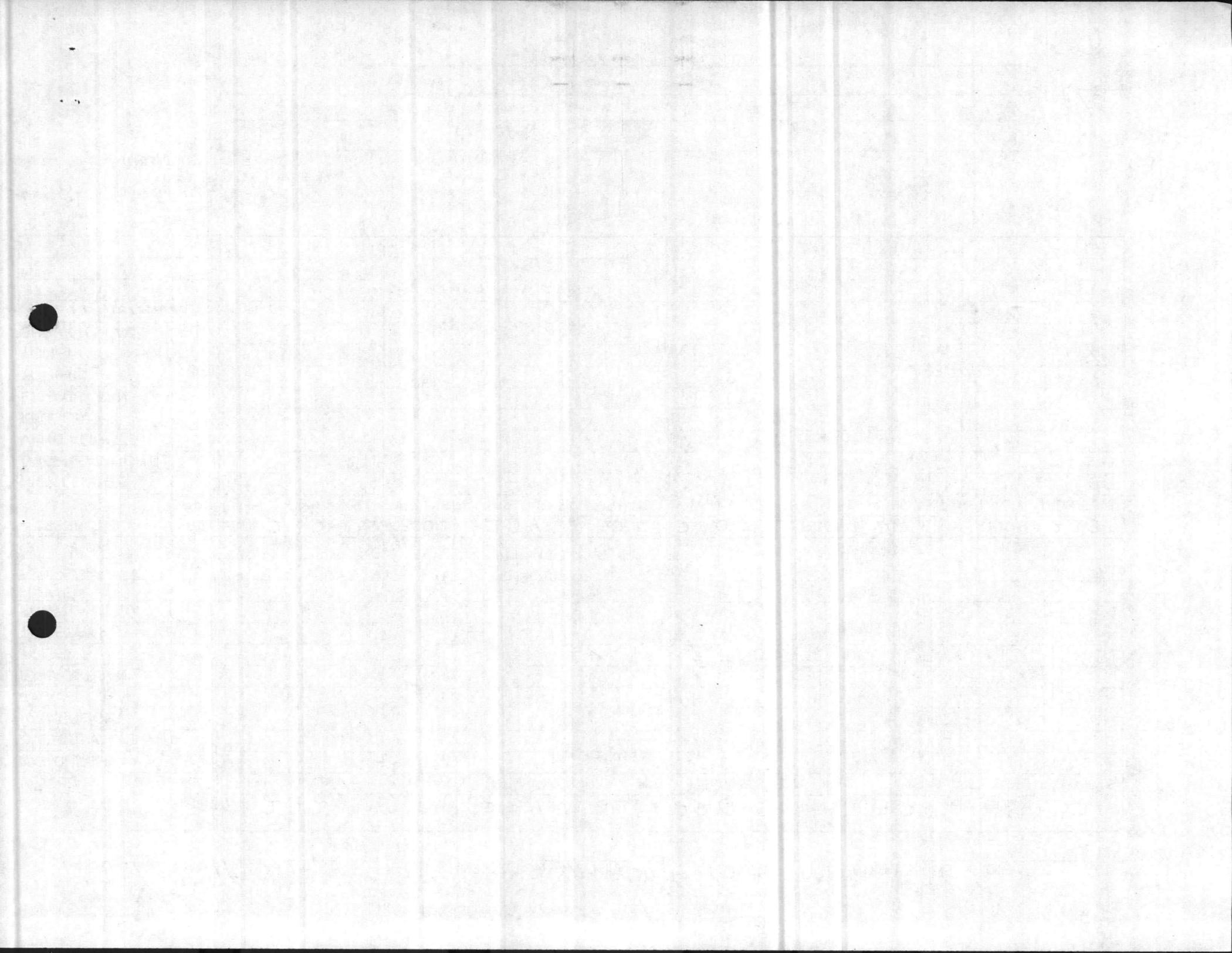
INSPECTOR YANKOSKY 10-18-00

SHEET # 6 OF

INSPECTION AREAS	ROOM # <u>222</u>			ROOM # <u>224</u>			ROOM # <u>226</u>			ROOM # <u>228</u>			ROOM # <u>230</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET							✓		LONG FLUSH						
TOLIET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM # <u>232</u>			ROOM # <u>234</u>			ROOM # <u>236</u>			ROOM # <u>235</u>			ROOM # <u>233</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
Smoke Detector														2	

REMARKS: _____

SHT # 16



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

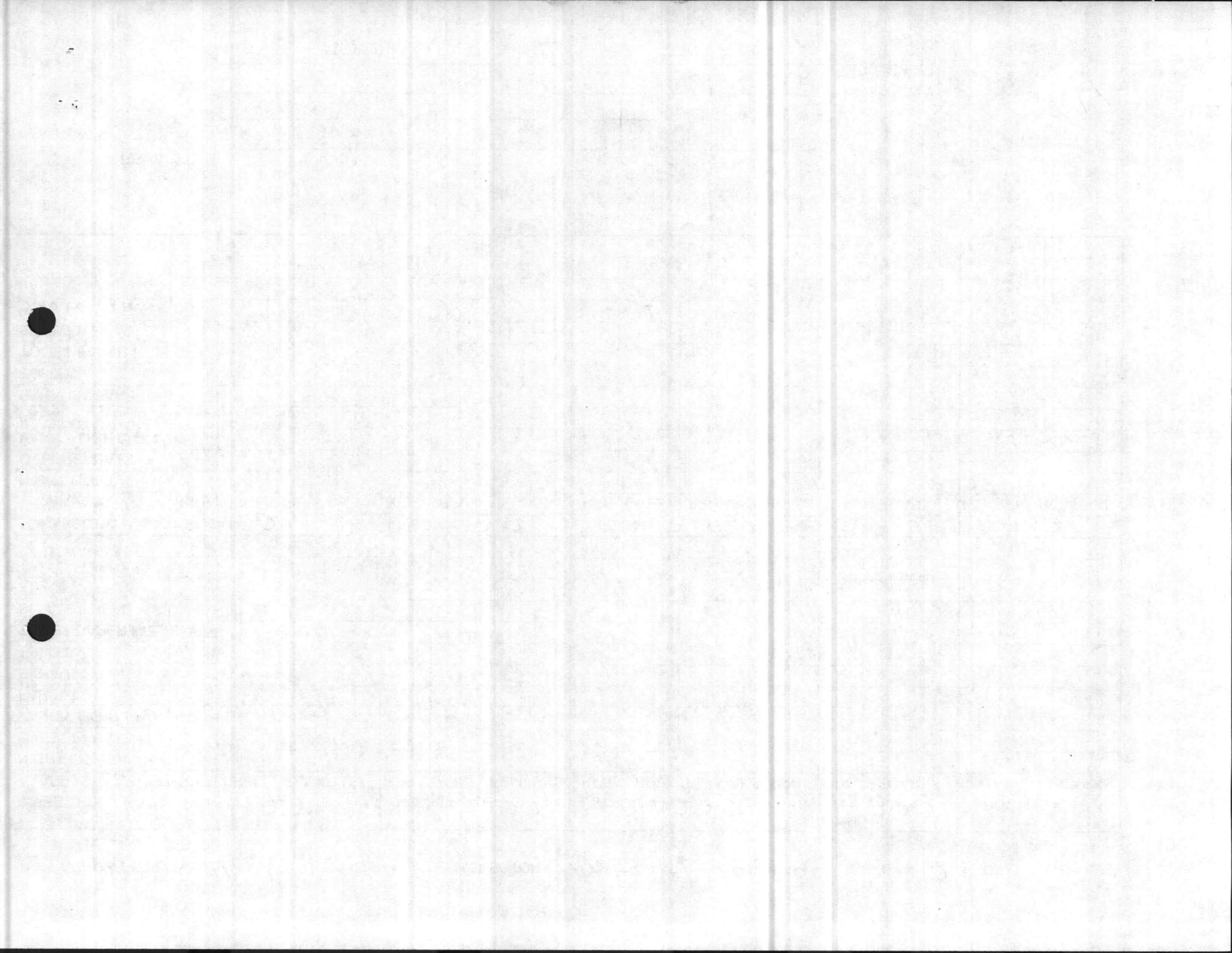
INSPECTOR YANIGOSKY 10-18-00

SHEET # 7 OF _____

INSPECTION AREAS	ROOM # <u>231</u>			ROOM # <u>227</u>			ROOM # <u>225</u>			ROOM # <u>223</u>			ROOM # <u>221</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
INSPECTIO AREAS:	ROOM # <u>219</u>			ROOM # <u>217</u>			ROOM # <u>215</u>			ROOM # <u>213</u>			ROOM # <u>211</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT <u>32'</u>															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
<u>Smoke Detector</u>									<u>1</u>						

REMARKS: _____

SHT # 17



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

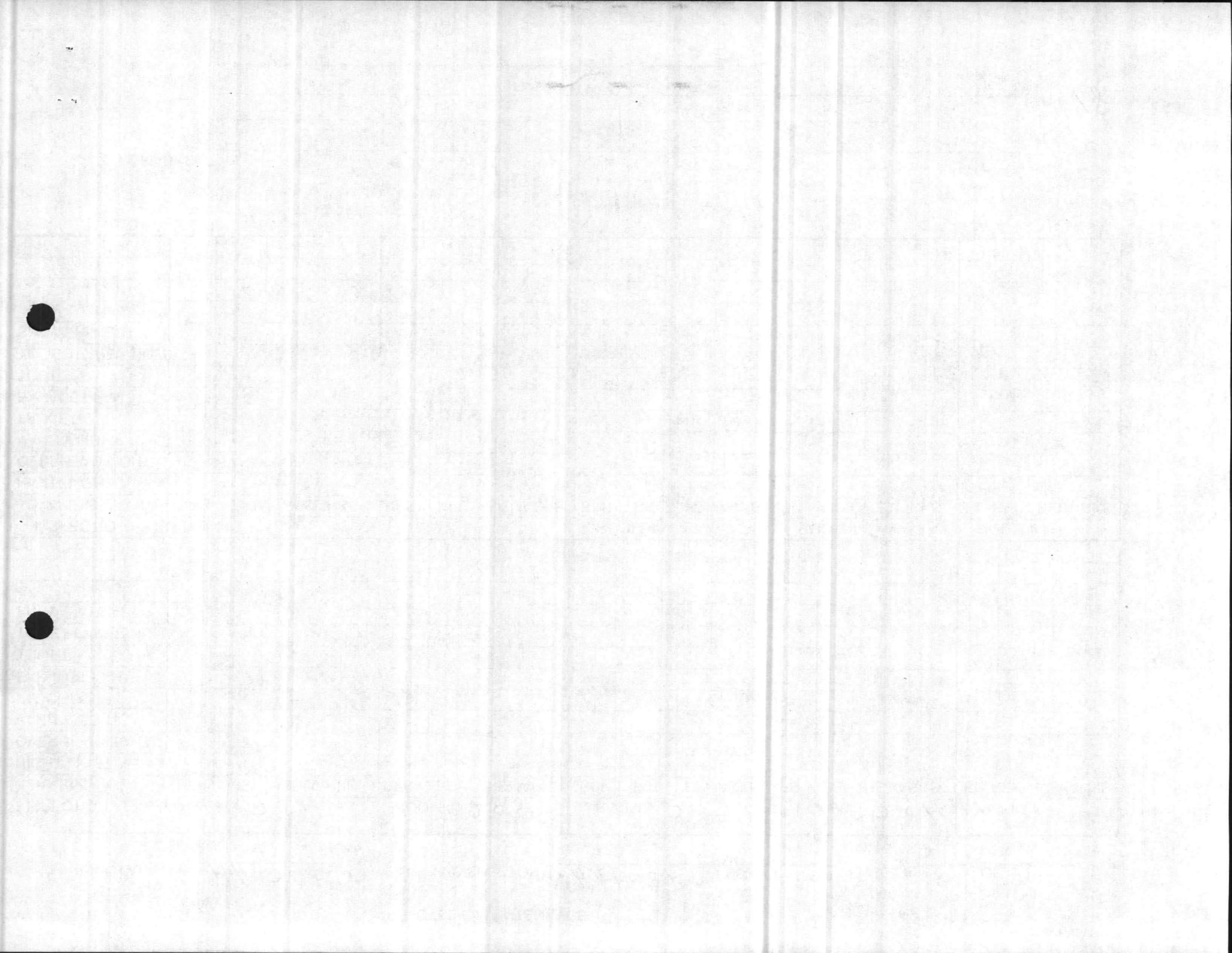
INSPECTOR YANKOSKY 10-18-00

SHEET # 8 OF

INSPECTION AREAS	ROOM # <u>209</u>			ROOM # <u>205</u>			ROOM # <u>203</u>			ROOM # <u>201</u>			ROOM #		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM #			ROOM #											
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS: _____

SHT # 18



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

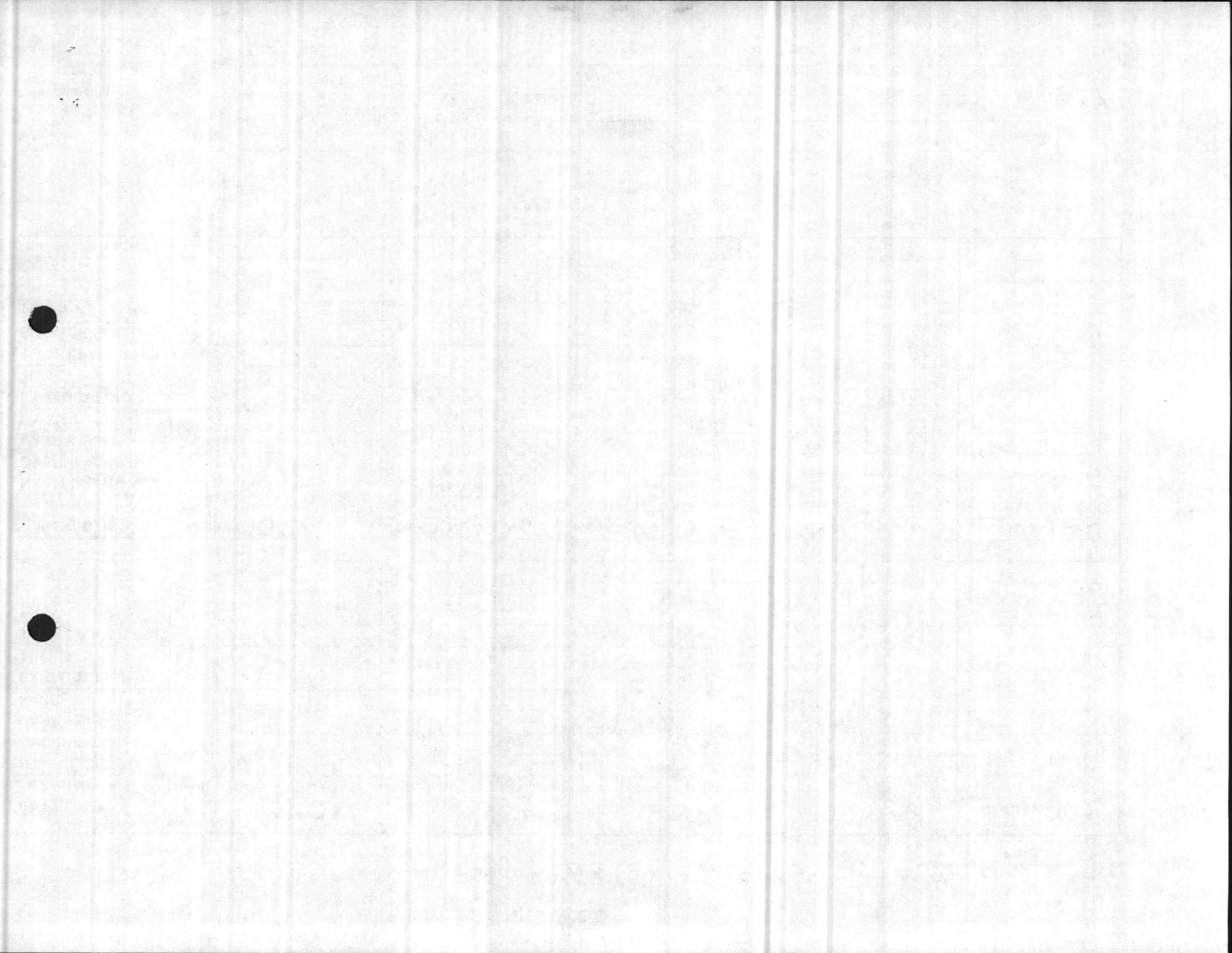
INSPECTOR YANKOVSKY 10-18-00

SHEET # 9 OF _____

INSPECTION AREAS	ROOM # <u>302</u>			ROOM # <u>304</u>			ROOM # <u>306</u>			ROOM # <u>308</u>			ROOM # <u>312</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
INSPECTION AREAS:	ROOM # <u>314</u>			ROOM # <u>316</u>			ROOM # <u>318</u>			ROOM # <u>320</u>			ROOM # <u>322</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT				✓											
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
TOWEL BAR				✓											

REMARKS: _____

SHT # 19



CYCLIC MAINTENANCE

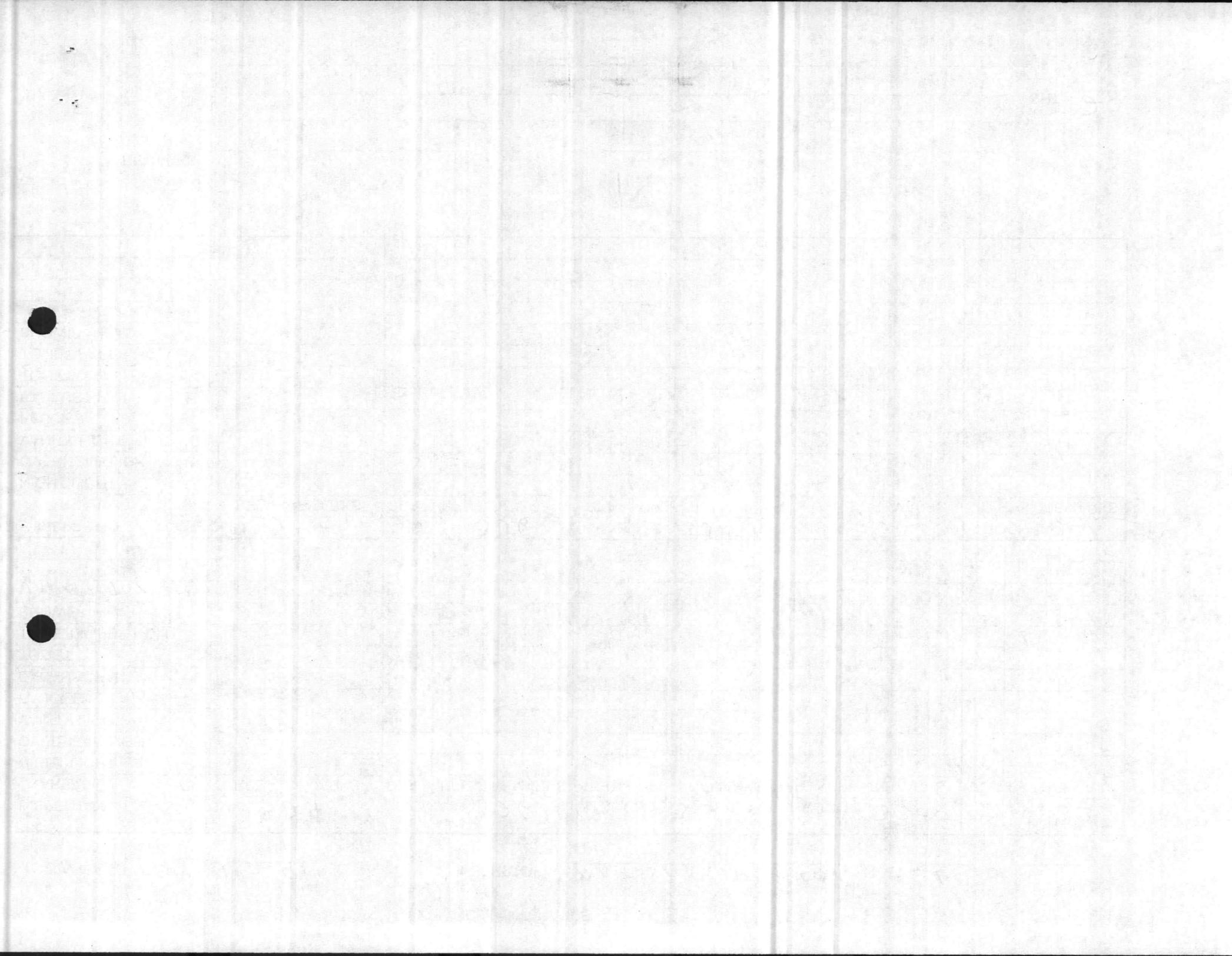
AREA & FACILITY: HP-301

INSPECTOR YANKOSKY 10-18-00

SHEET # 10 OF _____

INSPECTION AREAS	ROOM # <u>324</u>			ROOM # <u>326</u>			ROOM # <u>328</u>			ROOM # <u>330</u>			ROOM # <u>332</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT							✓								
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															1
SHOWER HEAD															
VANITY TOP											1				
INSPECTION AREAS:	ROOM # <u>334</u>			ROOM # <u>336</u>			ROOM # <u>335</u>			ROOM # <u>333</u>			ROOM # <u>331</u>		
	RPR	RPL	REMARKS	RPL	RPK	REMARKS									
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
Smoke Detector															1

REMARKS: _____



CYCLIC MAINTENANCE

AREA & FACILITY: HP-301

INSPECTOR YANKOSKY 10-18-00

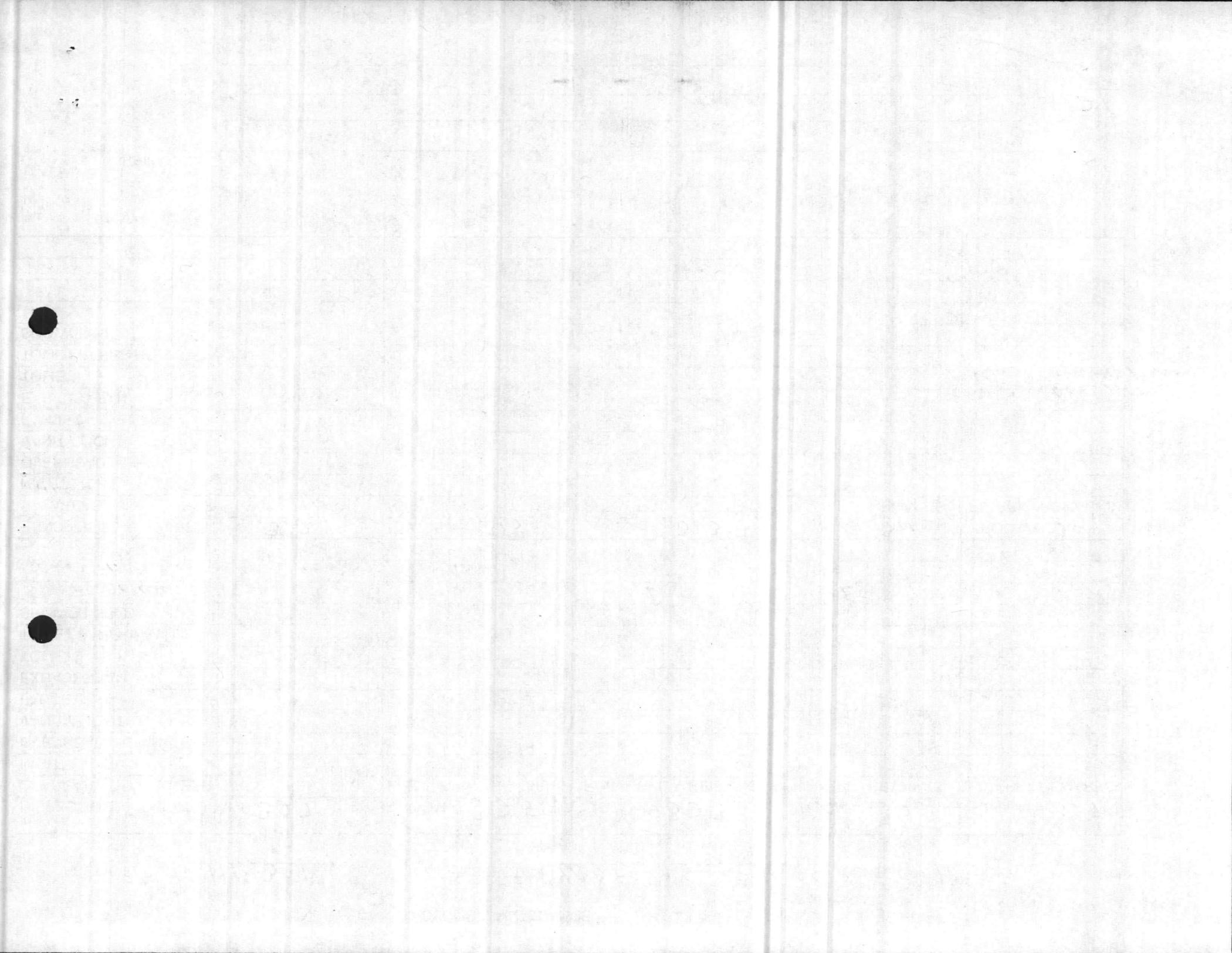
SHEET # 11 OF _____

INSPECTION AREAS	ROOM # <u>327</u>			ROOM # <u>325</u>			ROOM # <u>323</u>			ROOM # <u>321</u>			ROOM # <u>319</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															
<i>Smoke Detector</i>															
<i>POWER BAR</i>					<i>1</i>			<i>1</i>			<i>1</i>				
INSPECTION AREAS:	ROOM # <u>317</u>			ROOM # <u>315</u>			ROOM # <u>313</u>			ROOM # <u>311</u>			ROOM # <u>309</u>		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS: _____

SHT # 21

DOES NOT ALWAYS FLUSH



CYCLIC MAINTENANCE

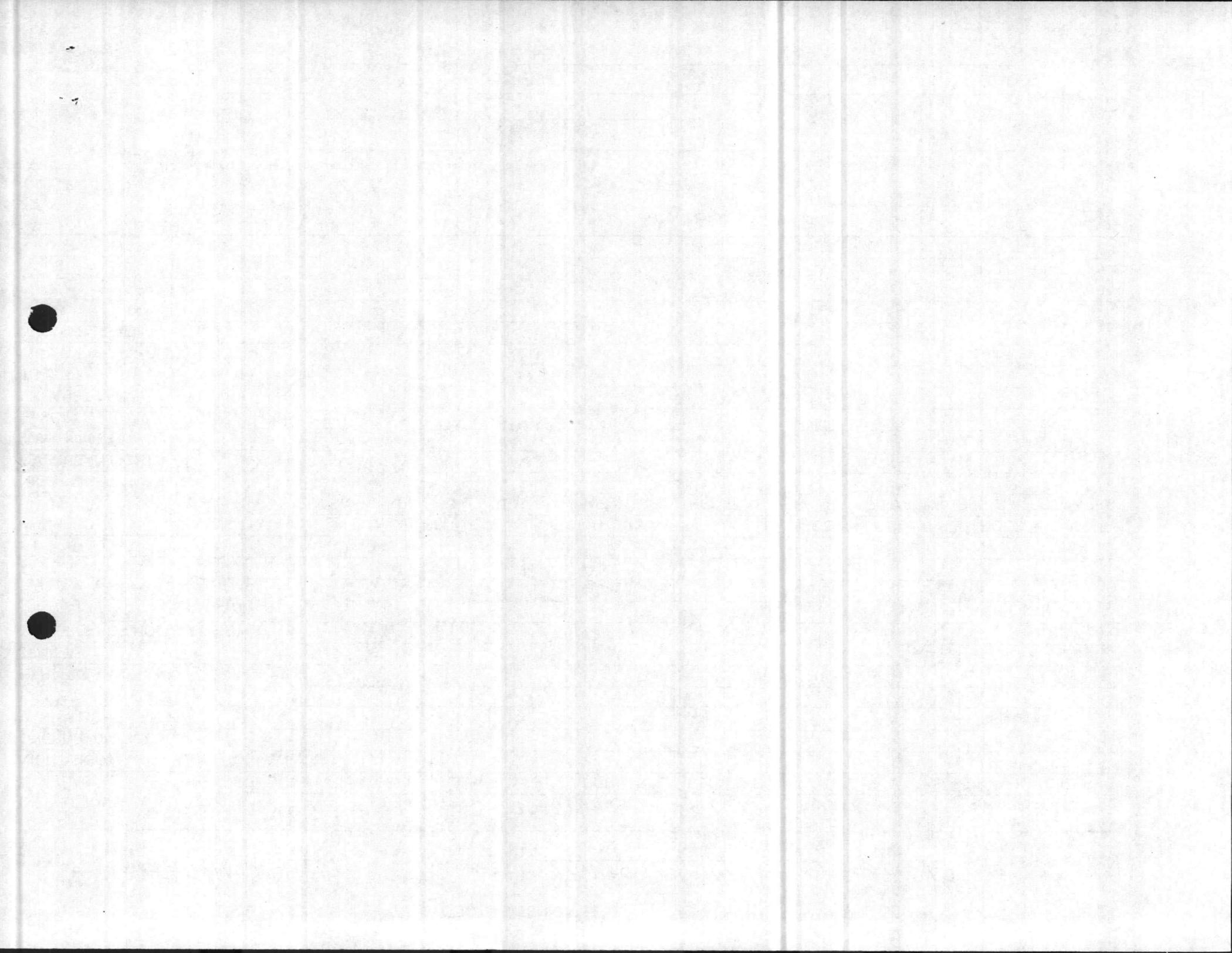
AREA & FACILITY: HP-301

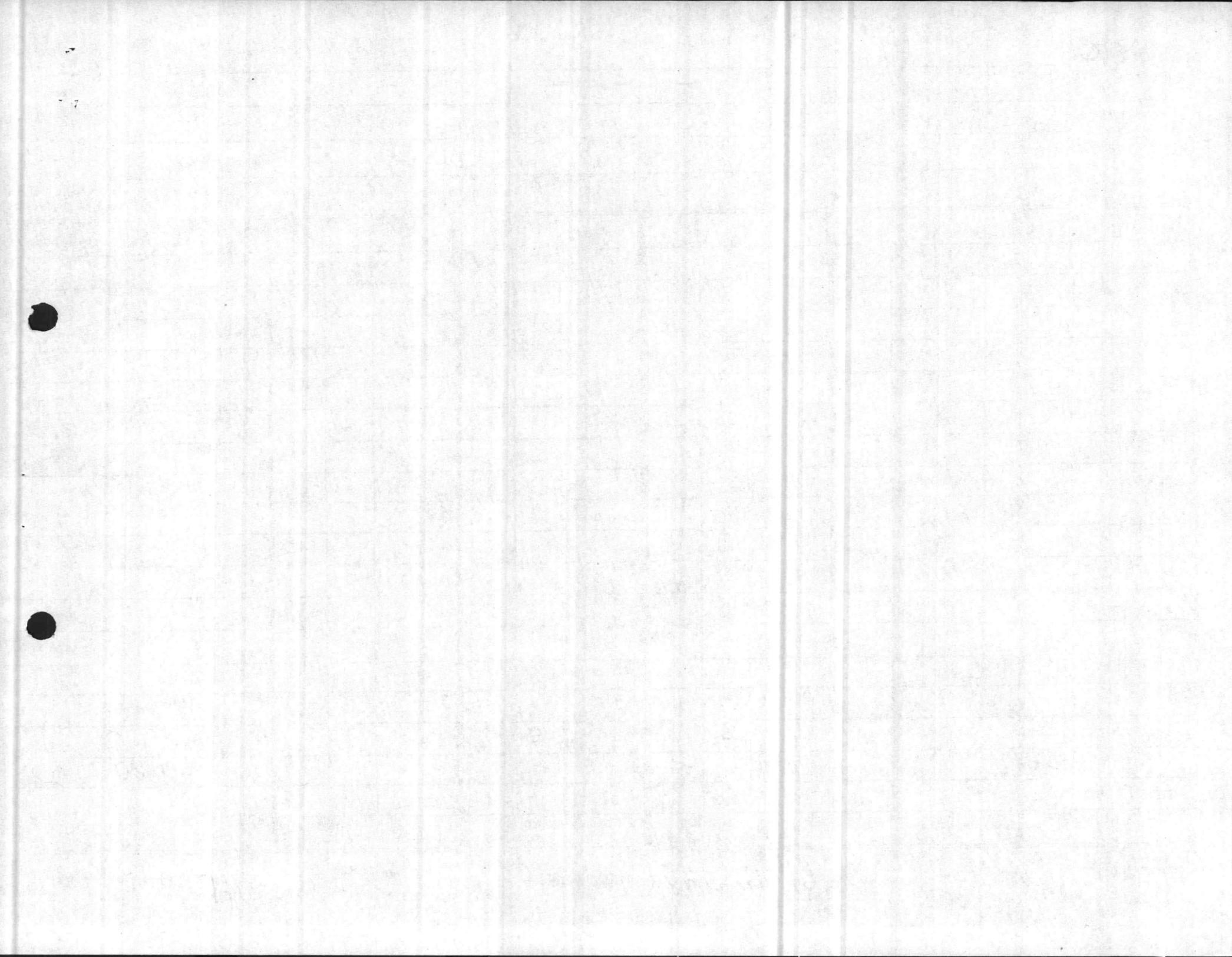
INSPECTOR YANKOSKY 10-18-00

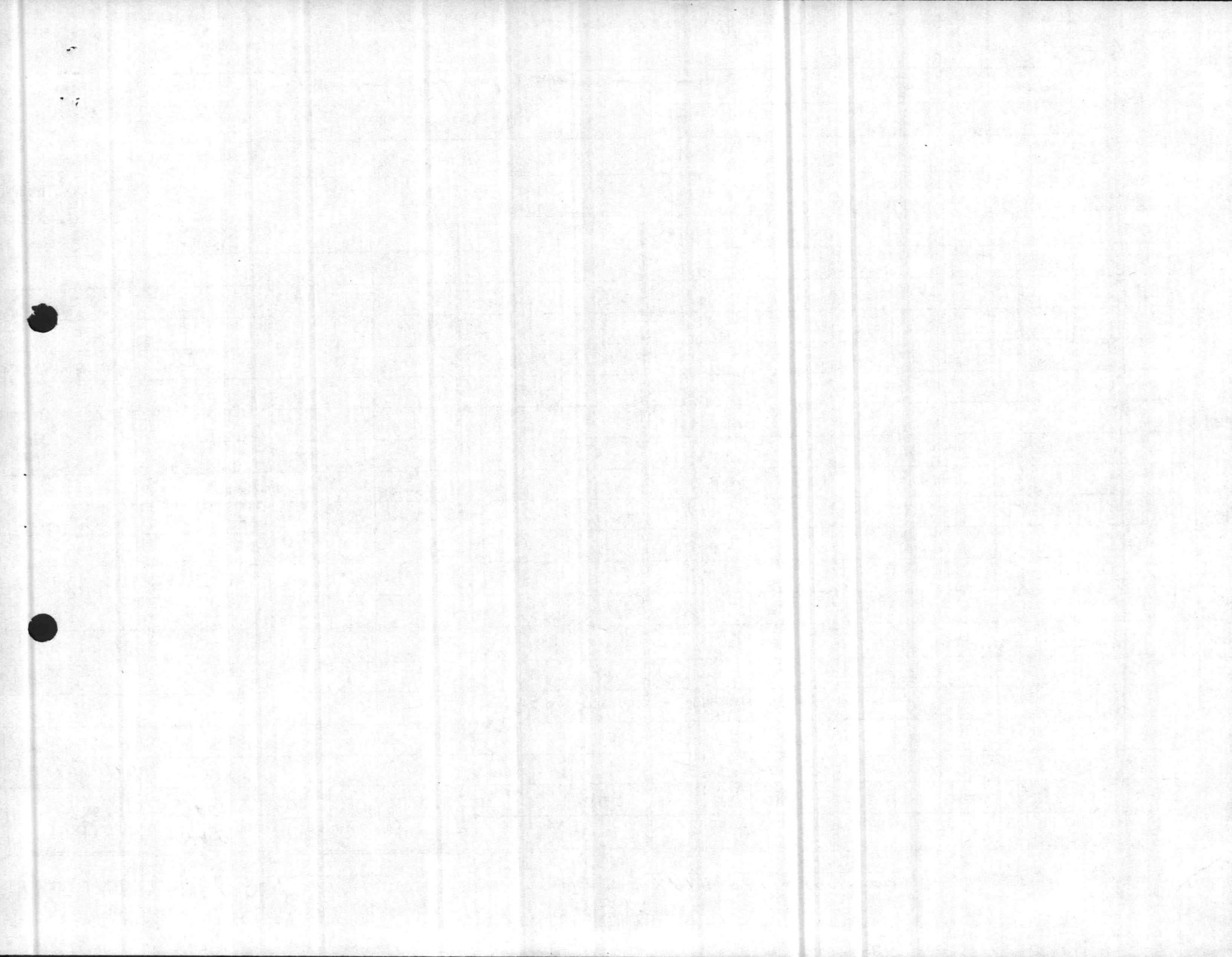
SHEET # 12 OF _____

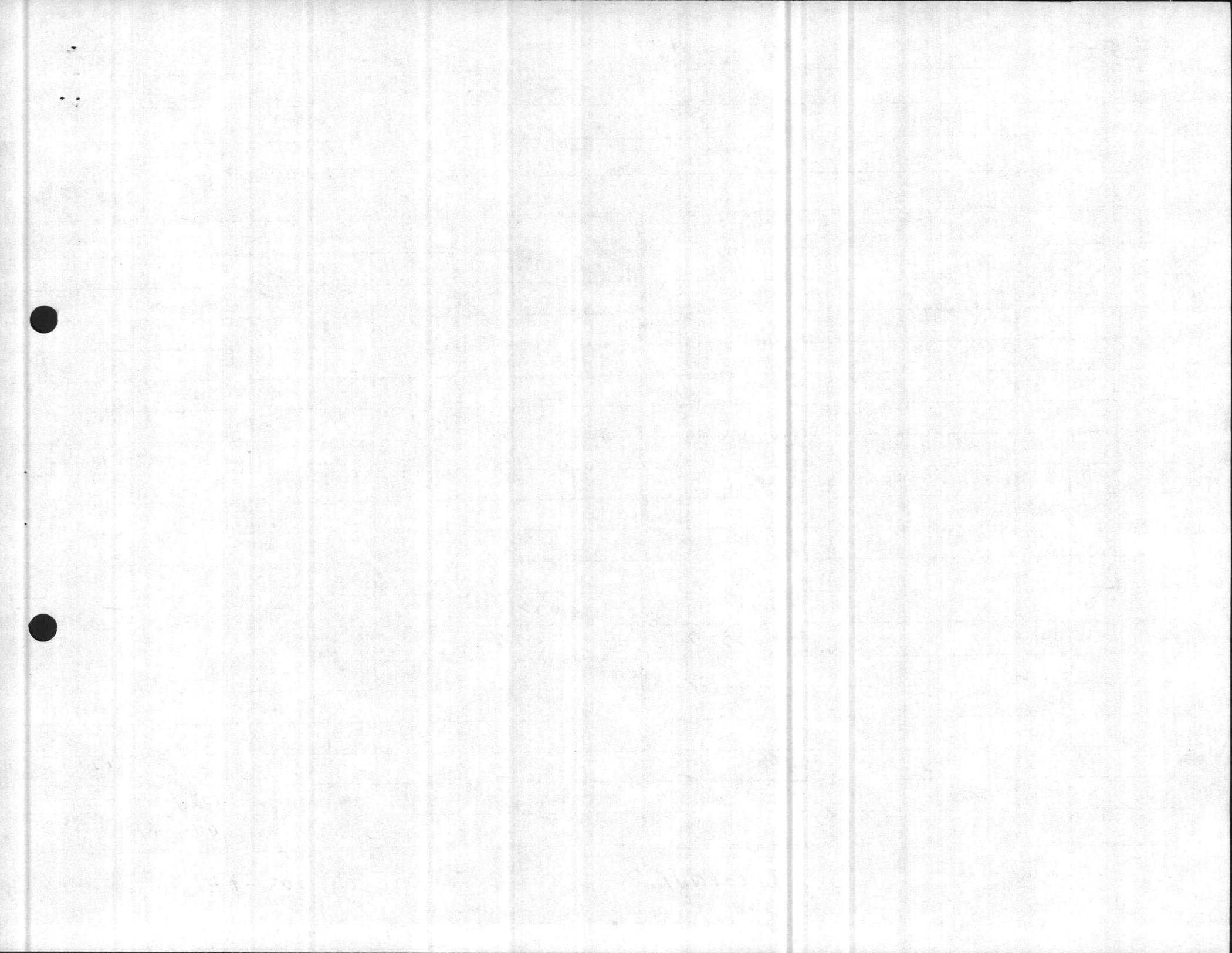
INSPECTION AREAS	ROOM # <u>305</u>			ROOM # <u>303</u>			ROOM # <u>301</u>			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT	✓														
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD		<u>1</u>													
<u>DOOR *LUB</u>							✓								
INSPECTION AREAS:	ROOM #			ROOM #			ROOM #			ROOM #			ROOM #		
	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPR	RPL	REMARKS	RPL	RPK	REMARKS
NIGHT LIGHT															
OVERHEAD LIGHT															
VANITY LIGHT															
FAUCET															
EXHAUST FAN															
TOLIET															
TOLIET PAPER HOLD.															
SHOWER HEAD															

REMARKS: _____









111



11



111

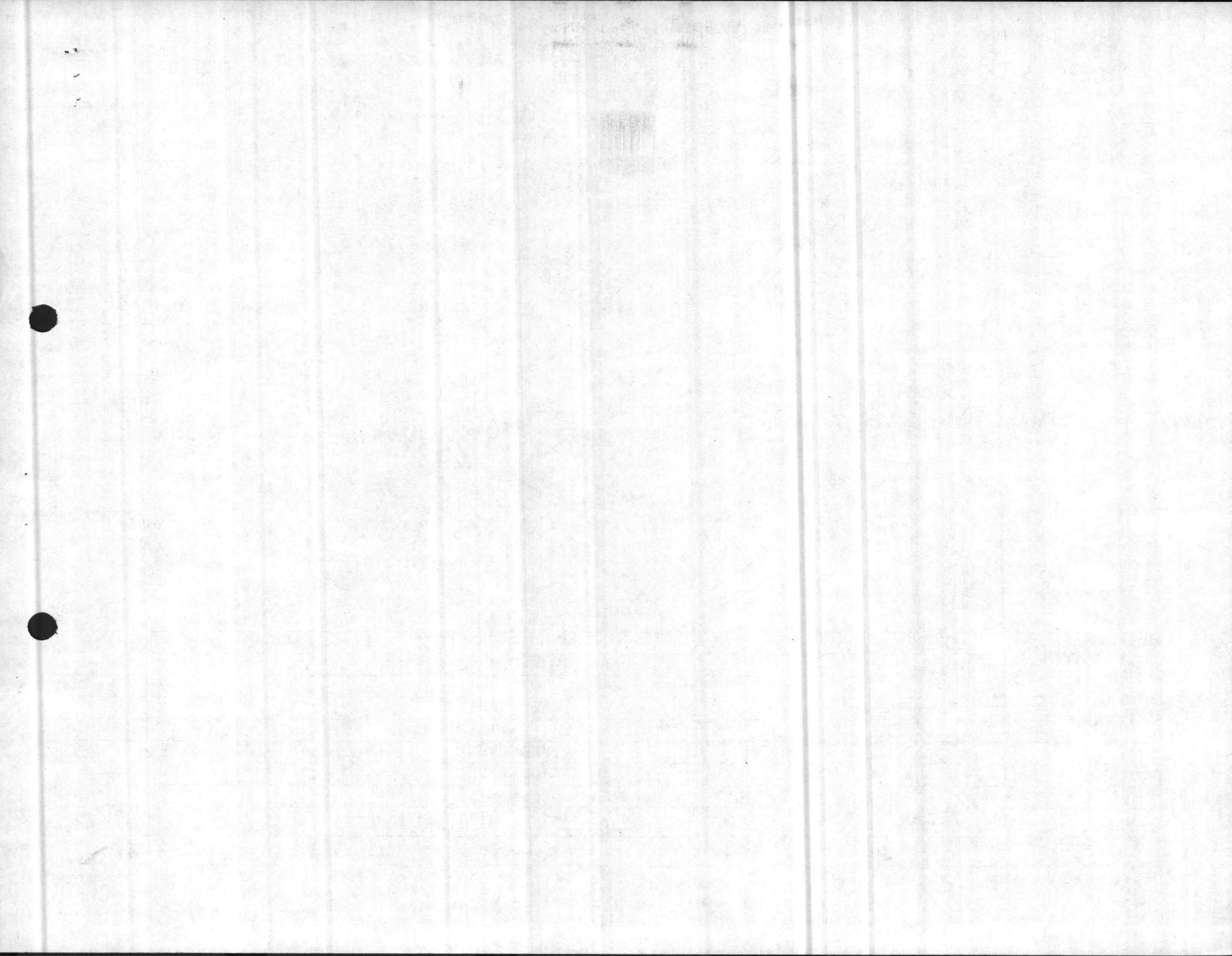
111

111



Percent	Amount	Category	Hours	Job Cost	Phase
100.00 %	1,326	Labor	51.0		
		Material			
		Subcontractor			
		Equipment			
		Other			
		User			
	1,326	Net Costs Subtotal			
	1,326	Total Estimate		\$0.00	

29-3031



INSPECTION REPORT

MCBCL 11101/16

Area & Facility No.		Date	Inspector & Time (Hours) Used	Sheet #	of	Sheets	
HP-301		10-19-00	YANKOSKY				
Work Center	Urgency Code *	DEFICIENCIES: Include Size, Sketches, and/or Special Information regarding needed corrections.			Action Taken	ESTIMATE	
						Man Hours	Total Cost
		4510-AP-199-14570	5400000000				
		6350-01-000-1774	TOLRET LONG FLUSH II SMOKE DETECTOR IIIII Oven Knob Repair III SHOWER DRAINS SLOW I EXHAUST FAN	41 CAMP 6240-01-004-3107			
		6240-00-299-7250	NIGHT LIGHT-III VAPOR LENS COVER I	21 CAMP			
		4510-01-037-4378	TOWER BAR III SHOWER HEAD I COUNTER TOP	P			
		6240-01-000-1832	DRIPS SECURE IIIII "V" TUBES 12 EMERGENCY LIGHT Repair I 7W LAMPS BATTERIES	P			
	5	5340-35-944-VIEW	VIEWER				
	4	6210-CR-AVF-2105	LENS for Office				
	3	4510-01-000-0671	T.P. holder	UPPER LENS			
	5	5930-01-000-2886	SWITCH				
	20	6240-01-157-5114	9000 RULL	6210-02-FVS-0048 6210-CR-AVF-2105			

* URGENCY CODE: Enter appropriate Code as follows:

- Emergency nature, should be corrected as soon as possible.
- Essential Maintenance, should be corrected within one (1) year.
- Projected Maintenance, correction can wait one or more years, indicate # of years.

ACTION TAKEN

- Emergency
- Preventive Maint.
- S. W. O. P.
- Deferred Maintenance

11

11

11

11



DATE: 10/19/00

EPS JOB: HP 301

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

PAGE: 1

JOB NUMBER: HP 301 CRAFT PHASE NO: 1 JOB PHASE NO: 1 P&E: JDY
BUILDING / FACILITY: HP-301 ZONE: 3 CREW SIZE: 2
WORK CENTER: 41CG COMPANY CONCEPT CARPENTER LABOR RATE: A
HAZARDOUS WORKING CONDITIONS: NO CREW RETURNS FOR LUNCH: YES
PHASE COSTS: LABOR: MATERIAL COST: 1172 EQUIPMENT COST:
DEPRECIATION COSTS: TOTAL: 1172
CONTRACT (Y/N): NO IFS PHASE NO.: 1

*** PHASE DESCRIPTION ***

MISC STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS.

TASK NUMBER: 1 TYPE: N/A
TTS REFERENCE: N/A SLOTTED: N/A HOURS: 0.0
MISC STRUCTURAL, ELECTRICAL, MECHANICAL, & PLUMBING REPAIRS TO ALL ROOMS AND PUBLIC AREAS.

*** THE LAST TASK IN THIS PHASE HAS BEEN PRINTED ***

*** JOB PHASE SUMMARY ***

CRAFT TIME	0.0
TOTAL EPS TIME	0.0
TOTAL NON-EPS TIME	0.0

TOTAL PHASE TIME	0.0

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

