

## FACILITIES ENGINEERING WORK REQUEST

For use of this form, see DA Pam 420-6; the proponent agency is OACSIM.

<b>PART A</b> <i>(See requestor instructions)</i>	CUSTOMER ID	DOCUMENT SERIAL NUMBER	FY	TYPE	SHORT JOB DESCRIPTION						DATE				
												DA	MON	YR	
INSTALLATION ABBREVIATION OF FACILITIES		BUILDING/FACILITY NUMBERS													
		1	2	3	4	5	6	7	8	9	10				
1															
2															
3															
REMARKS															
INSTALLATION NAME				CUSTOMER NAME				POC NAME				POC PHONE NUMBER			
WORK DESCRIPTION <i>(Description and justification of work request)</i>															
AUTHORIZED REQUESTOR <i>(Type or print)</i>							AUTHORIZED REQUESTOR SIGNATURE								
<b>PART B</b> <i>(Approving Official Only)</i>	APPROVAL ACTION CODE:						SPECIAL INTEREST CODE:						DATE		
	WORK REQUEST PRIORITY:						ESTIMATED WORK START DATE:			DA	MON	YR			
	PROGRAM INDICATOR CODE:						ESTIMATED WORK COMPLETION DATE:								
ENVIRONMENTAL IMPACT			WORK TO BE PERFORMED			WORKCLASS			APPROVAL AMOUNTS			SOURCE OF FUNDS			
YES <input type="checkbox"/>	NO <input type="checkbox"/>	ENVIRONMENTAL CONSIDERATION	<input type="checkbox"/>	IN-HOUSE	TOTAL <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>			\$	<input style="width: 40px; height: 20px;" type="text"/>	\$	<input style="width: 40px; height: 20px;" type="text"/>	<input type="checkbox"/>	DIRECT		
<input type="checkbox"/>	<input type="checkbox"/>	EIS / EIA INITIATED	<input type="checkbox"/>	SELF-HELP				\$	<input style="width: 40px; height: 20px;" type="text"/>	\$	<input style="width: 40px; height: 20px;" type="text"/>	<input type="checkbox"/>	AUTOMATIC REIMBURSEMENT		
<input type="checkbox"/>	<input type="checkbox"/>	EIS / EIA COMPLETED	<input type="checkbox"/>	CONTRACT				\$	<input style="width: 40px; height: 20px;" type="text"/>	\$	<input style="width: 40px; height: 20px;" type="text"/>	<input type="checkbox"/>	FUNDED REIMBURSEMENT		
<input type="checkbox"/>	<input type="checkbox"/>	EIS / EIA COMPLETED	<input type="checkbox"/>	TROOP				\$	<input style="width: 40px; height: 20px;" type="text"/>	\$	<input style="width: 40px; height: 20px;" type="text"/>	ACCOUNT PROCESSING CODE			
DESIGN APPROVAL <i>(Please type or print name)</i>			DATE		APPROVAL AUTHORITY <i>(Please type or print name)</i>			APPROVAL ACTION			DATE				
DESIGN APPROVAL SIGNATURE			DA	MON	YR	APPROVAL AUTHORITY SIGNATURE			<input type="checkbox"/>	APPROVED		DA	MON	YR	
									<input type="checkbox"/>	DISAPPROVED					

## COMPLETION INSTRUCTION FOR DA Form 4283 - FACILITIES ENGINEERING WORK REQUEST

(Part "A" completed by requestor per instructions below)

(Part "B" completed by the DPW in accordance with local procedures)

### PART "A"

**CUSTOMER ID:** One to three alpha numeric characters per local DPW policy.

A code used to identify the user, occupant, owner of a facility, or the organizational activity submitting a work request.

**DOCUMENT SERIAL NO:** Must be five alpha numeric characters. Based on local procedures, this number may be generated and entered by the requestor or computer generated and assigned by DPW. It is a number which indicates a place in a series and when used in conjunction with installation number, customer identification, document type, and fiscal year, it uniquely identifies one document of a particular type.

**FISCAL YEAR:** The last digit of the fiscal year; i.e., '3' for Fiscal Year 2003.

**TYPE:** Leave blank; DPW Work Reception will complete

**SHORT JOB DESCRIPTION:** Up to 30 alpha numeric characters that provide a description with a concise summary statement of the work to be performed.

**DATE:** The date Work Request was completed (Format - 15 JUL 03).

**INSTALLATION ABBREVIATION:** Up to eight alpha numeric characters for the locally assigned abbreviation of the installation's officially designated name; e.g., Fort Benjamin Harrison abbreviated as Fort Ben.

**FACILITY NUMBER:** A code of five alpha numeric characters which represent the unique serial number assigned to a real property facility within an installation for identification through its life cycle, e.g. P0001.

**REMARKS:** At a minimum, include email address of the Primary POC and an Alternate POC for requested work.

**INSTALLATION NAME:** The official name of an Army real estate holding and the principal function as defined in the real property inventory, e.g., Fort Lee.

**CUSTOMER NAME:** The name or description of the user, occupant, owner of a facility, or the organizational activity authorized to submit a request for work consisting of up to 15 alpha numeric characters.

**POC NAME:** Name of the person responsible for specific work information about requested work consisting of up to 15 alpha numeric characters (Format - Last Name, First Name)

**POC PHONE NUMBER:** Phone number for POC of this particular work request consisting of up to 12 alpha numeric characters.

**WORK DESCRIPTION:** Description of work to include impact and justification.

**AUTHORIZED REQUESTOR:** The name of the individual who is authorized to request work.

**SIGNATURE:** Signature of Authorized Requestor.