

FACILITIES ENGINEERING WORK REQUEST

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

PART A <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								
PART 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	NO	ENVIRONMENTAL CONSIDERATION EIS / EIA INITIATED EIS / EIA COMPLETED	<input type="checkbox"/>	IN-HOUSE	TOTAL	\$	FUNDED	\$	UNFUNDED	<input type="checkbox"/>	DIRECT				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	SELF-HELP		\$	\$	\$	\$	<input type="checkbox"/>	AUTOMATIC REIMBURSEMENT				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	CONTRACT		\$	\$	\$	\$	<input type="checkbox"/>	FUNDED REIMBURSEMENT				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	TROOP		\$	\$	\$	\$	<input type="checkbox"/>	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.