

FILE FOLDER

DESCRIPTION ON TAB:

89 J.O. Completed

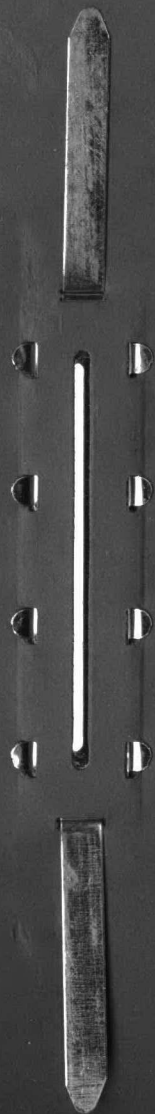
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DESCRIPTION:

J.O. CARD

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BLDG NO
89

INT. PAINT SQ FT

EXT. PAINT SQ FT

ROOF SQ FT

CONDEN. LINES LIN FT

FACILITY HISTORY RECORD
MCBCL 11011/3

JOB ORDER NO	DATE COMPLETED signed	COST	DESCRIPTION
NJ4-06729-22092J	3/17/64	?	Install telephone lines
CONTRACT	6/30/67	23,400.00	Additional A/C
AA1-234388-2312T	5/4/71	3812	Replace floor tile + coverbase on floor
AA1-234084-23T	5/7/71	1570	Repair + paint Bldg 89
3656	7-10-73	352	Flush sprinkler system
5080	5-31-73	4228	PM A/C month
4740	4-20-73	810	Clean coils + blowers to air handling
4143	6-29-73	580	Rpr A/C compressor motor
1174	8-9-73	1900	Constant strg bldg
0255	4-2-73	342	Repair all score tables
3164	6-11-74	5394	PM A/C'S MONTHLY
4183	1-3-75	521	Purchase (4) closers door + install
3874	8-22-74	746	Rpr a/c
4802	5-23-74	310	Rpr chll water line
4308	12-12-73	1892	Rpr A/C compressor
4101	10-9-73	700	Replace discharge valve on Worthington compressor + rpr water tower
4372	3-22-74	312	Repair A/C
4963	5-11-75	440	Paint office + stairroom, snack bar section
4710	4-4-75	810	Rpr air handling unit
4672	6-20-75	3155	Rpr air conditioning
3424	11-7-75	11,772	Rpr air conditioning
4311	11-7-75	344	Rpr + service 4 exhaust fans
3182	7-2-76	2425	PM-yearly Air Conditioner
AA6-5098	6-4-76	260	Replace Exhaust Fan over ladies head
AA6-4918	2-27-76	1570	Clean A/C Coils

JOB ORDER NO	DATE COMPLETED	COST	DESCRIPTION
3186	9/16/76	2836	Pm A/C monthly
3579	12-9-77	5243	Replace westington compressor
4849	9-23-77	5193	Self help - do painting
4186	7-1-77	4186	Replace ceramic floor tile in shoe room
2588	4-22-77	468	Install washer/dryer
4905	9-23-77	505	Paint postcard overhang front bldg.
4889	9-23-77	153	Remove/replace (12) overhead light fixtures
4904	9-23-77	666	Remove " " " "
3401	1-13		
8-25-80	80-2011		Ext paint
162470-78C-8N4	12-17-80	3512	Steam pit improvement for energy conservation
3601	1-13-78		Rpr leaking water line
3518	Comp 78	1898	Procure service contract keys 12 entrance metal door
0229	12-22-78	305	Extend heating and A/C ductline into storeroom office
5275	9-1-78	1025	Replace 400 Amp circuit breaker
5462	9-29-78	1036	Clean coils in Air handling units in attic (10)
4295	5-5-78	418	Make necessary repairs and paint
5847	9-25-78	3588	P.M. A/C monthly - Change filters
6201-204	79	4580	Pm A/C monthly Change filters weekly
3347	Comp 79	439	Patch plaster + paint manager's sec. office
444	11-30-79	444	Remove metal cover + buck + block
0103	11-30-79		up openings
3884	4-27-79	1128	Repr A/C
3815	5-18-79	930	Repr ext door
4031	5-18-79	7477	Repr A/C system in Bowling ally
4654	4-18-80	172	Replace floor tile
3553	1-9-80	1108	Clean coils in Air handling units
3423	10/2/81	1678	Interior Repair

BLDG NO

INT. PAINT SQ FT

EXT. PAINT SQ FT

ROOF SQ FT

CONDEN. LINES LIN FT

FACILITY HISTORY RECORD

MCBCL 11011/3

JOB ORDER NO	DATE COMPLETED	COST	DESCRIPTION
4233	7-17-81	6516	Rpr. A/C
3082	12-11-81	1090	" " compressor
4510	9-4-81	1627	" "
1092	7-31-81	515	INSTALL EMERGENCY LIGHTS
3972	7-24-81	820	Correct drainage
3874	6-12-81	249	Install pipe
3193	4-9-82	693	Replace floor tiles
2025	2-4-83	1374	INSTALL CIRCB Breakers + Enclosures FOR (32) Bowling MACHINES
3637	5-28-82	524	PAINT ENT + TRIM
2086	8-20-82	516	REPLACE WORD ON BUILDING SIGN
0109	5-7-82	87 2	FABRICATE SILK SCREEN
1211	3-5-82	459	INSTALL EMERG. LTg.
1034	7-15-83	621	REMOVE EXIST. DEEP SIGN, DRAIN LINES, INSTALL DEEP SINK
1150	9-17-82	3327	INSTALL 2 CENTRAL A/C
3615	10-1-82	1498	REPAIR HEAT + AIR CONDITIONING
1340	11-5-82	1711	INSTALL PADDLE FANS
3910	8-6-82	1544	REPAIR A/C
1533	1/22/83	537	INSTALL GLASS DOOR
3846	3/11/83	543	RPI FORMICA ON CONTROL DESK
1152	3/3/83	3345	INSTALL WALL BOARD
3246	11/23/83	1639	REPL COMPRESSOR ON WORKING TON CHILLER
1141	1/12/83	392	INSTALL DOOR/JAMB
1193	3/3/83	327	INSTALL GUARD RAIL
4591	9/30/83	5987	Rpr A/C
✓ 0120	12-6-84	2472	Fabricate + install Glass partition with door
✓ 3928	8-31-84	1943	Repl. A STEAM HEATED COIL IN AN AIR HANDLING UNIT

BLDG CLASS 2 PROPERTY RECORD
 (004) UIC..M67001 (001) PR NO.....2-06552
 MCB CAMP LEJEUNE NC (005) FACILITY NO..89
 (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.11J

GENERAL INFORMATION
 (007) ACTION.....CAP-IMPROV
 (008) FAM HOUSING....NO
 (009) EE DATE.....17 SEP 81
 (011) PR REVIEW DATE.17 SEP 81
 (010) FACILITY NAME..
 BOWLING ALLEY

ACQUISITION
 (201) ESTATE.....13 OTHER MIL FUND
 (202) ACQ CONTRACT...
 (203) ACQ DATE.....01 OCT 64
 (204) GOVT COST..... \$601,560
 (207) LAND CCN.....91140

MEASUREMENTS
 (301) LENGTH.... 185 FT
 (302) WIDTH..... 183 FT
 (303) HEIGHT.... 26 FT
 (304)/AREA..... 30,363 SF
 (308) AREA UM...
 (305) STORIES... 01
 (307) IRREGULAR. YES

CONSTRUCTION
 (401) YEAR BUILT.....1964
 (402) CONSTRUCTION TYPE..PERMANENT
 (403) YEAR IMPROVED.....

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

MAINTENANCE
 (701) MAINT UIC..M67001 (702) PRIME USE....74040 (703) MFC...4 USMC

STATUS / UTILIZATION
 (502) CATEGORY CODE...74040 (501) USE..BOWLING ALLEY
 (510) USER UIC.....M67001.....MCB CAMP LEJEUNE NC

AREA/SF*	OTHER/	ALT/LA	DEF CODES
ADEQ(515).....25,757.00 (516)		(517).....32.00 (524)	
SBST(518)	(519)	(520)	(525)
INAD(521)	(522)	(523)	(526)
TOTAL	25,757.00	32.00	

AREA2#*	OTHER	ALTYA	DEF CODES
25,757.00 (516)	(517)32.00 (524)	
282 (518)	(520)	(525)	
1NAC (521)	(523)	(528)	
TOTAL 25,757.00		32.00	

(510) USER UIC.....M07001.....MGB CAMP LEJUNE NC
 (505) CATEGORY CODE...74040 (501) USE..BOWLING ALLEY
 STATE UTILITY ACTION

(701) MAINT UIC..M07001 (702) PRIME USE...74040 (703) MEC...4 USMC
 MAINTENANCE

(403) YEAR IMPROVED.....
 (402) CONSTRUCTION TYPE..PERMANENT
 (401) YEAR BUILT.....1964
 CONSTRUCTION

(307) IRREGULAR.. YES
 (305) STORIES... 01
 (308) AREA UM...
 (304) AREA... 25,383 SF
 (303) HEIGHT... 28 FT
 (302) WIDTH... 183 FT
 (301) LENGTH... 182 FT
 AREA

(107) MAP GRID..111
 (102) AC.....05
 (104) CITY.....0732 CAMP LEJUNE
 (103) COUNTY...133 ONSLW
 (102) STATE...37 NORTH CAROLINA
 (101) COUNTRY..02 UNITED STATES
 LOCATION

(107) MAP GRID..111
 (102) AC.....05
 (104) CITY.....0732 CAMP LEJUNE
 (103) COUNTY...133 ONSLW
 (102) STATE...37 NORTH CAROLINA
 (101) COUNTRY..02 UNITED STATES
 LOCATION

(104) UIC..M07001
 MGB CAMP LEJUNE NC
 (100) PR NO.....2-0822
 (102) FACILITY NO..89
 (106) SPEC AREA...DA
 HADNOT POINT
 PROPERTY RECORD

BLDG

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

(004) UIC..M67001
MCB CAMP LEJEUNE NC

(001) PR NO.....2-06552
(005) FACILITY NO..89
(106) SPEC AREA....DA
HADNOT POINT

(502) CATEGORY CODE...74028 (501) USE..AMUSEMENT CENTER

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

	AREA/SF*	OTHER/	ALT/	DEF CODES
ADEQ(515).....	2,162.00	(516)	(517)	(524)
SBST(518)		(519)	(520)	(525)
INAD(521)		(522)	(523)	(526)
TOTAL	2,162.00			

(502) CATEGORY CODE...74004 (501) USE..EXCHANGE CAFETERIA

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

	AREA/SF*	OTHER/	ALT/	DEF CODES
ADEQ(515).....	2,444.00	(516)	(517)	(524)A30 A24
SBST(518)		(519)	(520)	(525)
INAD(521)		(522)	(523)	(526)
TOTAL	2,444.00			

BLDG

CLASS 2 PROPERTY RECORD

(C-D-N-T-I-V-U-A-T-I-O-N)

(1004) UIC..M67001
 (1001) PR NG.....S-06525
 (1002) FACILITY NG..89
 (100) SPEC AREA...DA
 HADNOT POINT

(502) CATEGORY CODE...74028 (501) USE..AMUSEMENT CENTER

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

DEF CODES	AREA USE*	OTHER V	ALTA
ADCD(515).....2,162.00 (518)	(517)	(524)	
282T(518)	(519)	(525)	
INAD(521)	(522)	(526)	
TOTAL	2,162.00		

(502) CATEGORY CODE...74004 (501) USE..EXCHANGE CAFETERIA

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

DEF CODES	AREA USE*	OTHER V	ALTA
ADCD(515).....2,444.00 (518)	(517)	(524) A30 A54	
282T(518)	(519)	(525)	
INAD(521)	(522)	(526)	
TOTAL	2,444.00		

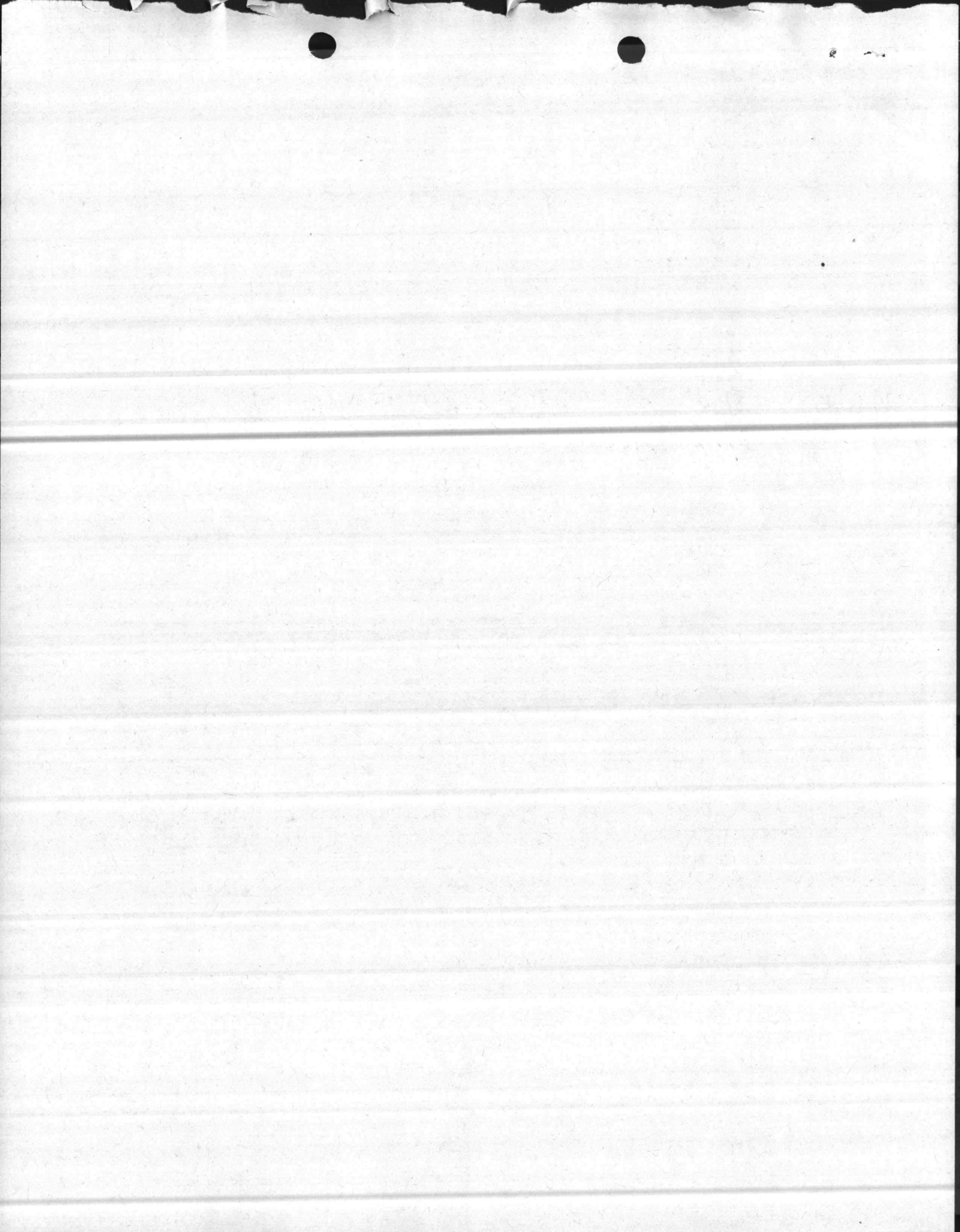
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work requests

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WORK REQUEST (MAINTENANCE MANAGEMENT)

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

(PW Department see Instructions
in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>25863</i>
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>26 February 2003</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Vern Swaim 451-5121</i>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

1. Air conditioner units on top of Bldg 89, Bonnyman Bowling Center have a cleaning procedure that is suppose to occur twice a day. The solution tanks are located in the steam room of the bowling center. These units have not worked in over two years. The solution tanks are dried up and this cause the units to go down frequently. Plus the return air vents frequently get clogged up. These vents are cleaned now.

2. Request appropriate action to ensure the electrostatic filters get cleaned on schedule.

53 WOPS to Muhammad

03 FEB 27 AM 7:23

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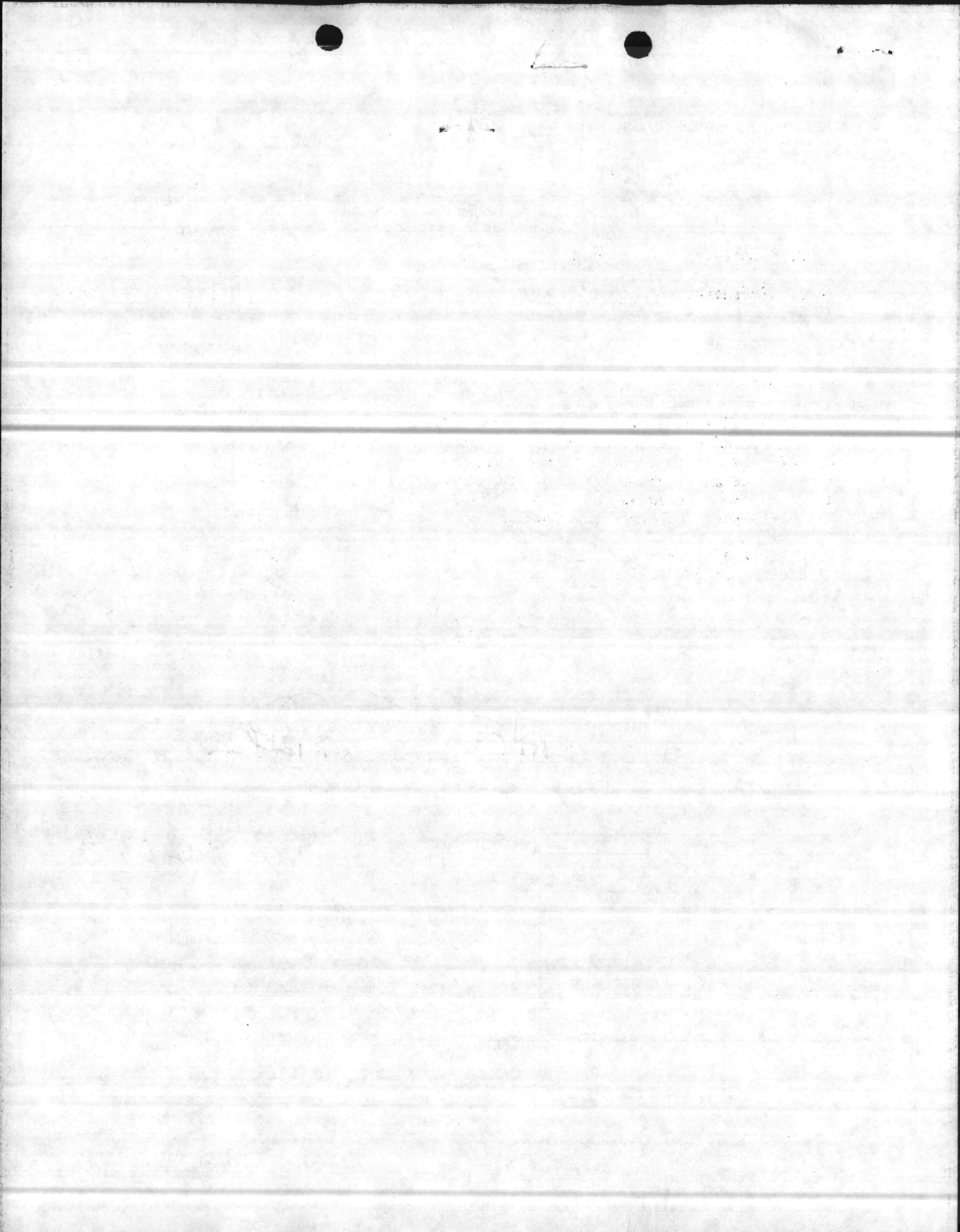
PART II—COST ESTIMATE (Filled out by Maintenance Control Division if estimate requested)

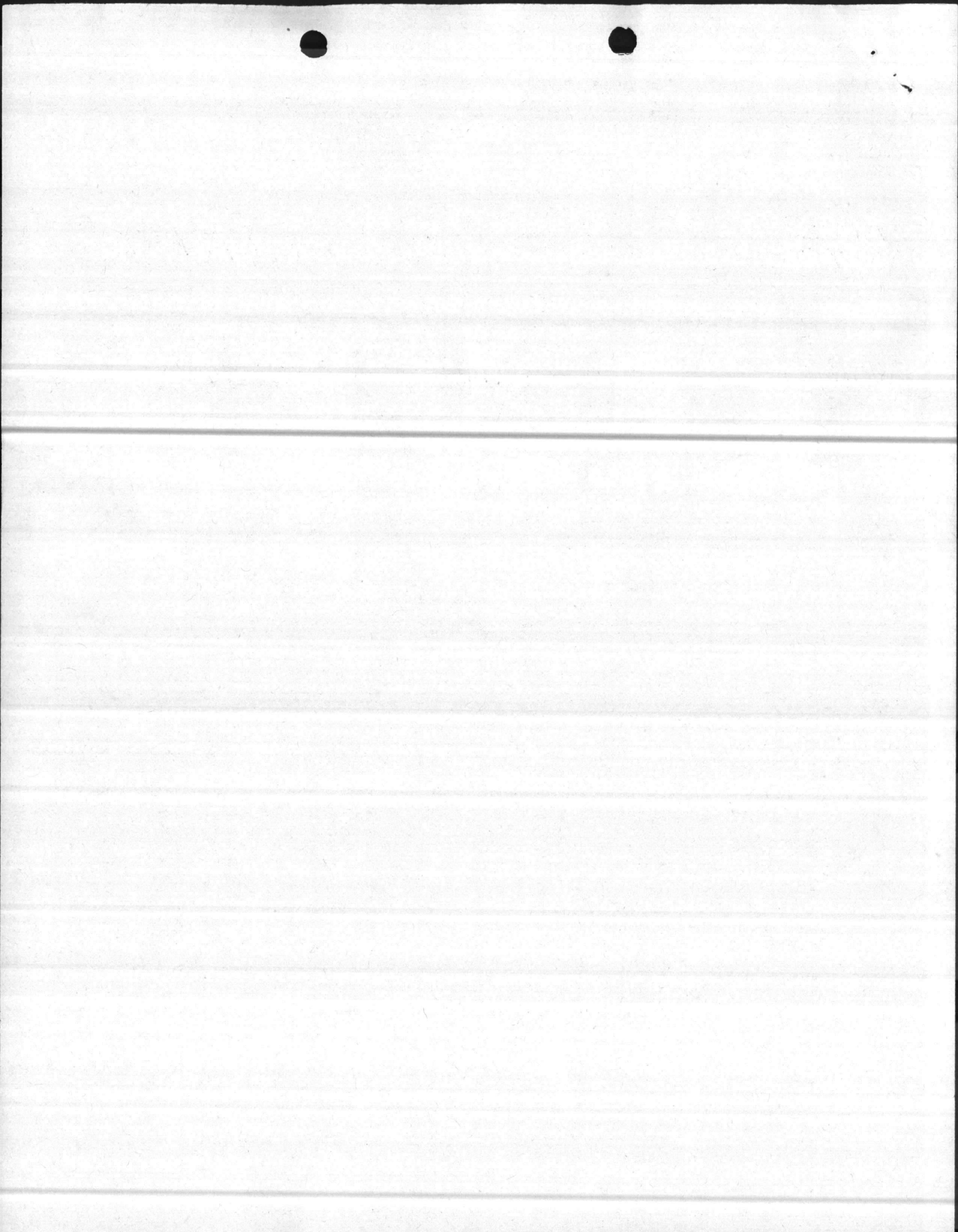
11. TO:		12. ESTIMATE NO. <i>03-54073</i>
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____, IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE
		17. DATE

PART III—ACTION (Filled out by Requestor)

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

(See Part IV on Reverse Side)





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

(PW Department see Instructions
 in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance	2. REQUEST NO. 25787
3. TO Base Maintenance Officer	4. DATE OF REQUEST 21 February 2003
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Billie Jean Shaw 451-5731	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

1. It is requested that the Bonnyman Bowling Center Snack Bar, Bldg 89 be exterminated for fruit flies.

03-52968

*Insp
WOPS
20
Henry PC*

03 FEB 24 AM 10:06

9. FUNDS CHARGEABLE

AF

10. SIGNATURE (Requesting Official)

[Signature]
David L. Parker

PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

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

PART III—ACTION (Filled out by Requestor)

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

(See Part IV on Reverse Side)

1947

WORK REQUEST (MAINTENANCE MANAGEMENT) (PW DEPARTMENT SEE INSTRUCTIONS)
 NAVFAC 9-11014/20 REV. 2-68) S/N 0105-LF-002-7510 in NAVFAC MO-321
 Supersedes NAVDOCKS 2351

PART I - REQUEST (Filled out by Requestor)

1. FROM Commanding Officer, 2nd CEB, 2nd Mar Div	2. REQUEST NO. D030-050-03
3. TO Commanding General, MCB (Attn: BMO)	4. DATE OF REQUEST 03 MAR 10
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ASAP
6. FOR FURTHER INFORMATION CALL SSgt. Duncan @ ext. 451- 5319.	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: Bldg. 101 Vault door.

PROBLEM: Vault door locking system is inop. Need a lock smith to come and look at problem and fix lock if possible, or replace if needed.

MAR 10 2003

JUSTIFICATION: Access to the Vault is crucial to the daily operations of the Bn work day. / SECURITY

9. FUNDS CHARGEABLE

10. SIGNATURE (Requesting Official)
 SSgt Duncan, T. J | By Direction

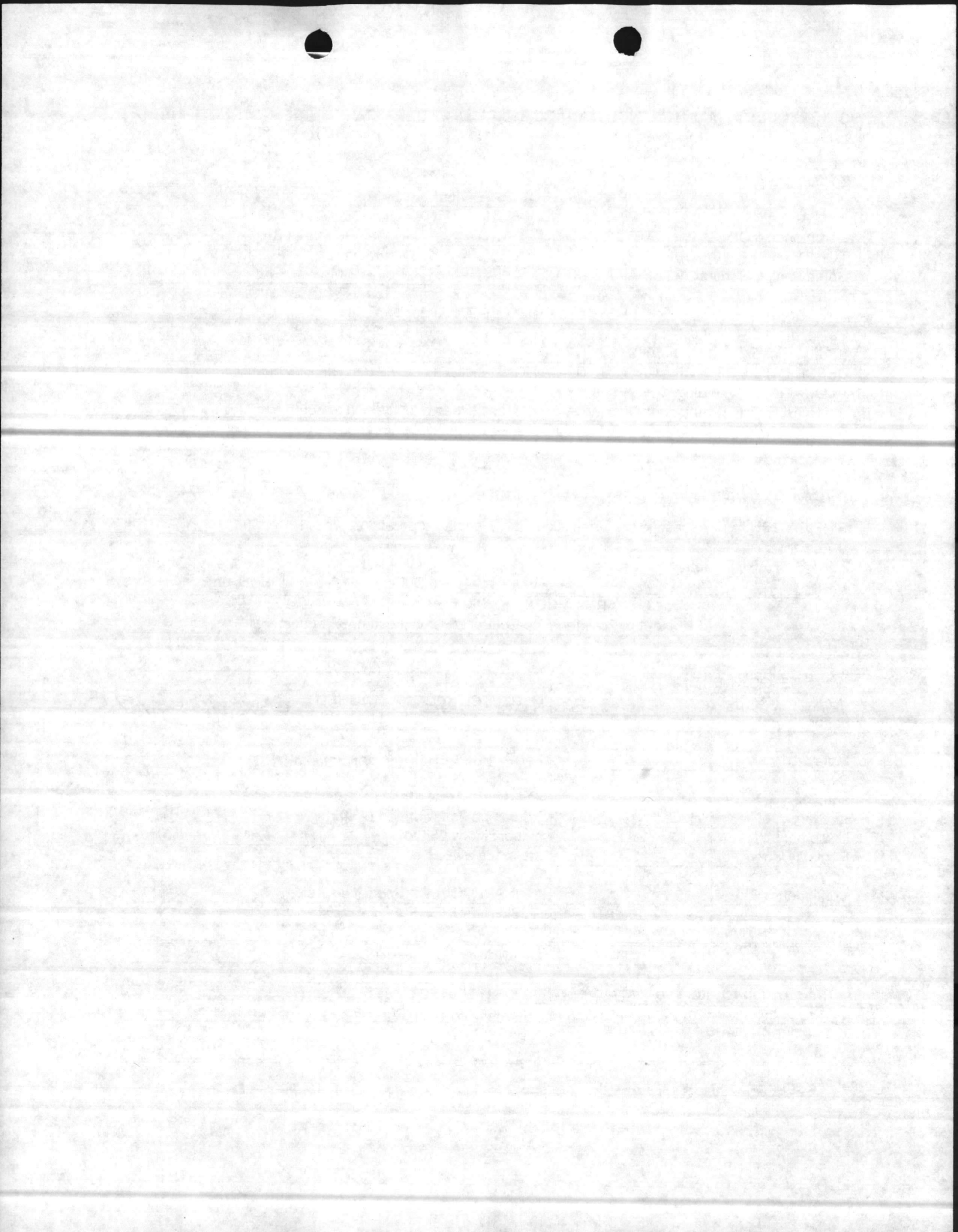
PART II - COST ESTIMATE

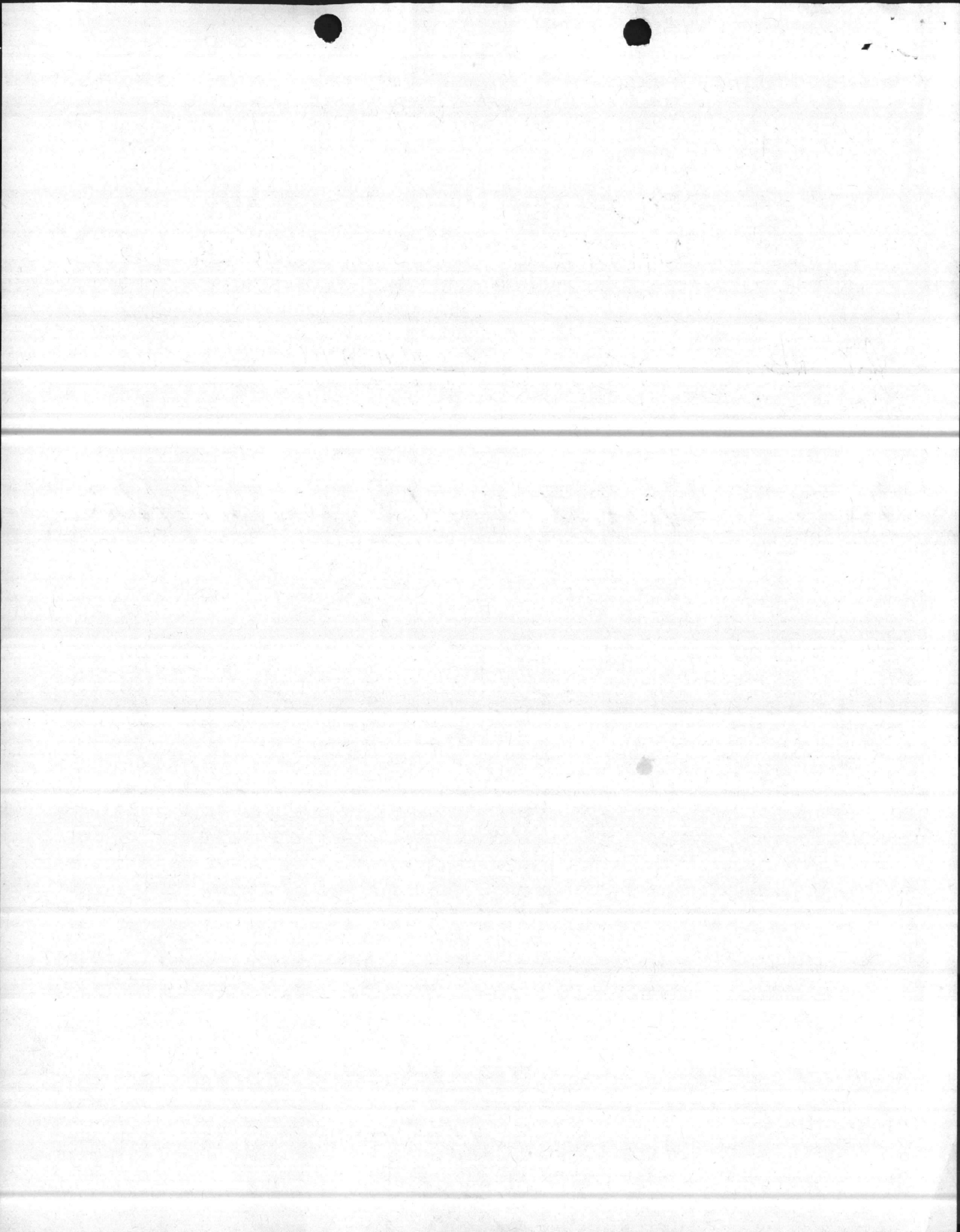
(Filled out by Maintenance Control Division if estimate requested)

11. TO:	12. ESTIMATE NO.
13. COST ESTIMATE	
a. Labor	14. SKETCH / PLAN ATTACHED YES <input type="checkbox"/> NO <input type="checkbox"/> 09-60949
b. Material	15 APPROVED. Programming to start in _____
c. Overhead and / or Surcharge	APPROVED. Based on present workload, this job can be programmed to start in _____ if _____ if authorized by 25th of _____ and funds are made available.
d. Equipment Rental / Usage	DISAPPROVED. (See reverse side)
e. Contingency	16. SIGNATURE
f. TOTAL	17. DATE

PART III - ACTION (Filled out by Requestor)

18. TO:	20. WORK REQUESTED HAS BEEN
19. AUTHORIZATION TO PROCEED IS ATTACHED <input type="checkbox"/> NAVCOMPT 140 <input type="checkbox"/> OTHER	<input type="checkbox"/> CANCELED <input type="checkbox"/> DEFERED <input type="checkbox"/> FORMED BY OTHER
21. SIGNATURE	22. DATE





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

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>24137</i>
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>29 October 2002</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Vern Swaim 451-1521</i>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

Bonnyman Bowling Center, Bldg 89

1. It is requested that the roof leaks be repaired, also the water damaged ceiling tiles (approximately twelve) be replaced.

2. It is requested that the column by the spare time concourse door's be repaired or replaced due to deteriorated due to leaks.

Review

'02 OCT 30 AM 10:40

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

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

PART III—ACTION (Filled out by Requestor)

18. TO:		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)

Journal

1911

1911

11/28/21
10-10-21

My dear Mr. ...
I have no objection to your ...
I shall be glad to see you ...
Yours truly,
...

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

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>		2. REQUEST NO. <i>22816</i>
3. TO <i>Base Maintenance Officer</i>		4. DATE OF REQUEST <i>14 August 2002</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Vern Swaim 451-1521</i>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

1. Request steam room located in the Bonnyman Bowling Center, Bldg 89 be checked for asbestos.

Note: There is a sign on the door indicating such.

Review

'02 AUG 15 AM 9:04

02-16 758
[Signature]

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

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

PART III—ACTION (Filled out by Requestor)

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

OR - J/ - 80
1
1

74A

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

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM MCCS, Facilities/Maintenance		2. REQUEST NO. 22267
3. TO Base Maintenance Officer		4. DATE OF REQUEST 16 July 2002
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL Vern Swaim 451-5121		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

1. It is requested that five emergency lights in the Bonnyman Bowling Center, Bldg 89 be repaired or replaced. The lights are not working.

02-155394

41

02 JUL 17 PM 12:54

9. FUNDS CHARGEABLE

AAF

10. SIGNATURE (Requesting Official)

David L. Parker

PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

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

PART III—ACTION (Filled out by Requestor)

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

1-15

1-15

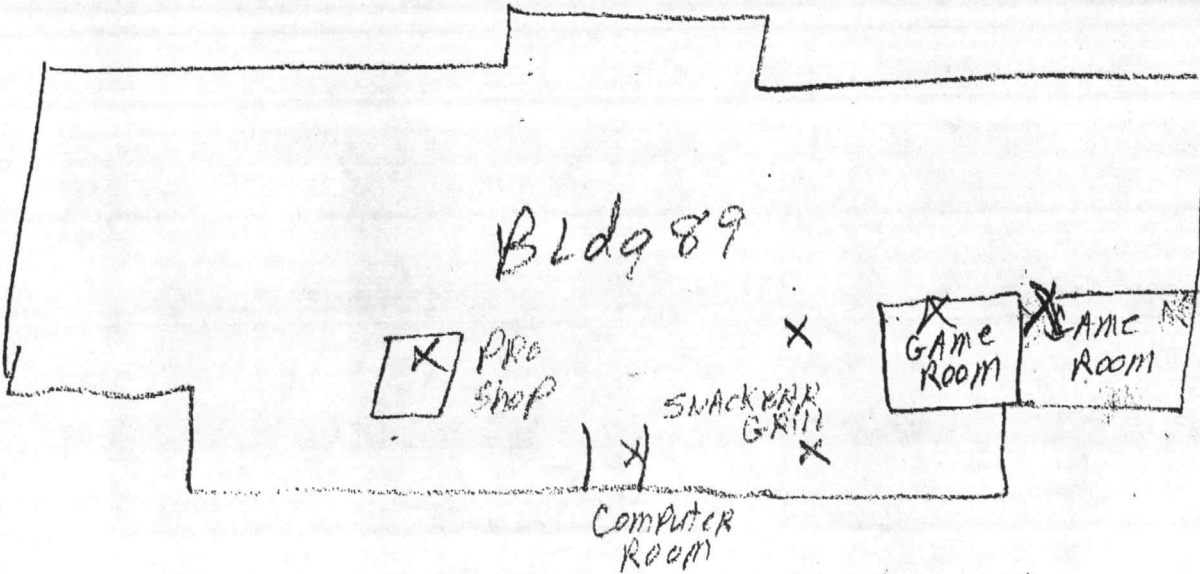
1-15

Morale, Welfare, and Recreation Department

Maintenance Work Request

Requesting Activity: BONNYMAN		Cost Center #: 5812-01	Date: 15 Jul 02
POC Name: VERN/Bobby	POC Phone: 451-5121	Activity Request #: BBC 89	
Property Item, Vehicle Licence, or Building Number: 89			

Nature of work (be specific as to location, mode #, dimensions, what doesn't work, etc.)



EMERGENCY lights NOT WORKING. (5 each)

Submitted to Base Maintenance

on work request no: **22967**

Date: **07-16-02**

Section Code No: **F253**

02 JUL 15 PM 2:41

Work is for:

Normal/Prev Maint

Safety/Health Req

Vandalism/Insurance

Improve Operation/Decorative

Directed by Higher Authority

(Who: _____)

Other: _____

Requested by: *[Signature]*

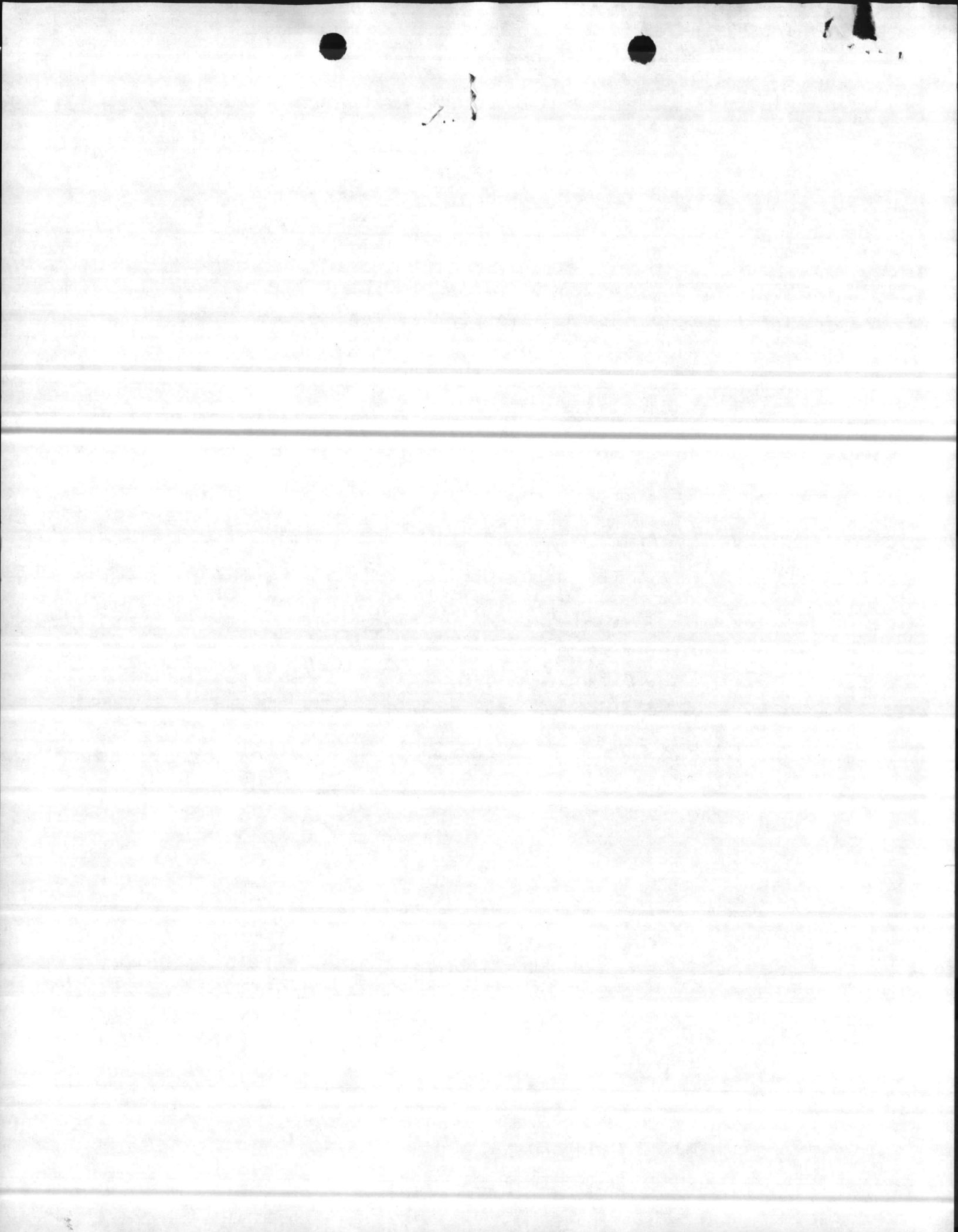
Routing: (use initials)

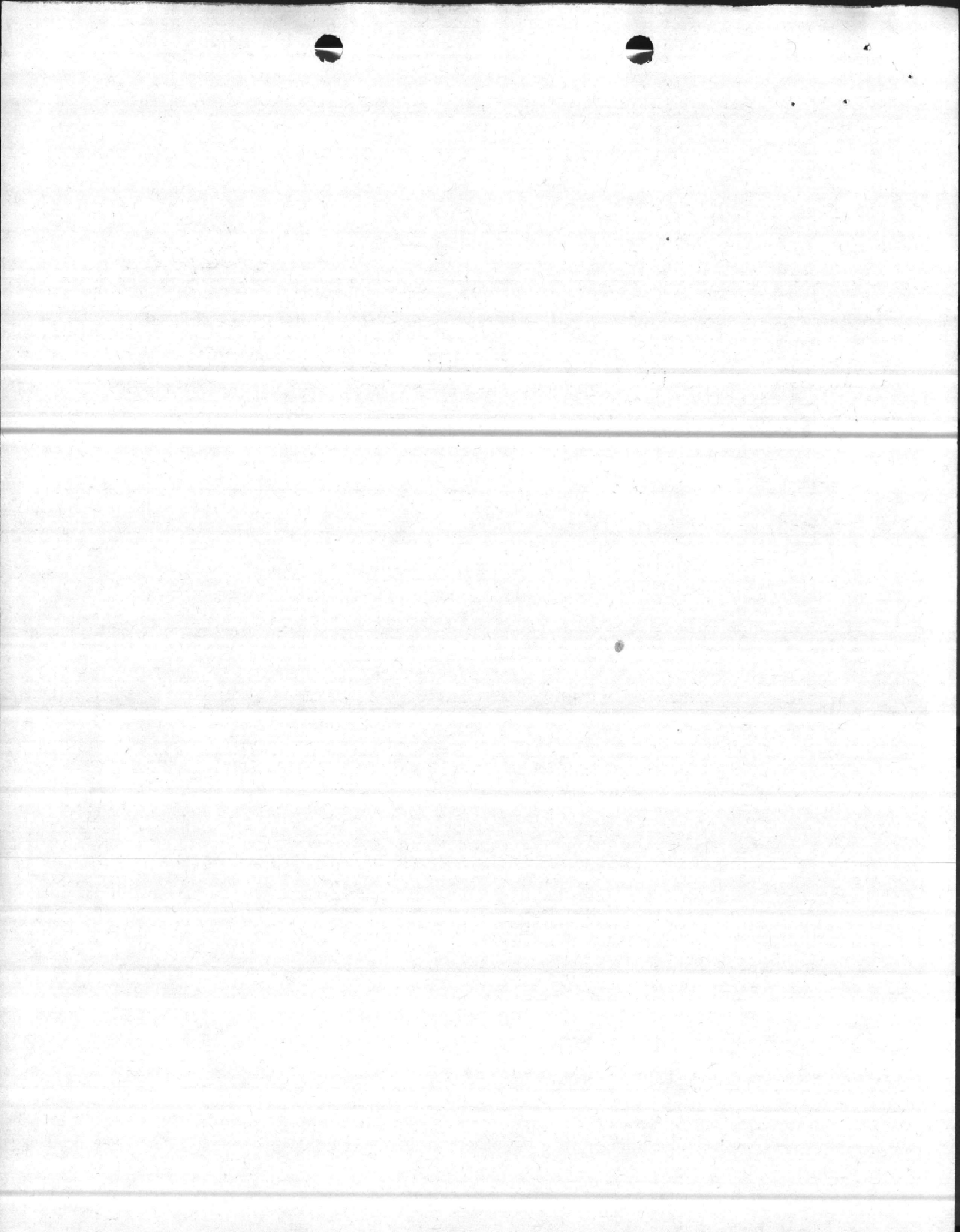
Branch Head/Area Spvr:	<input type="checkbox"/> Forwarded	<input type="checkbox"/> Returned; Date _____
Opns/Bud	<input type="checkbox"/> Forwarded	<input type="checkbox"/> Returned; Date _____
Division Head:	<input type="checkbox"/> Forwarded	<input type="checkbox"/> Returned; Date _____

Comments

Assignment: MWR Maint. Job# _____ Base Maint WR# _____ Other: _____

Forward this form, IAW your Division Policy, to MWR POC & Maint Bldg 1015 MWR 11000/1 (10/89)





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

(PW Department see Instructions
 in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <i>MCCS, Facilities/Maintenance</i>	2. REQUEST NO. <i>21923</i>
3. TO <i>Base Maintenance Officer</i>	4. DATE OF REQUEST <i>25 June 2002</i>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <i>Vern Swaim 451-5121</i>	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

1. It is requested that all the glass doors to the Bonnyman Bowling Center, Bldg 89 be repaired or replaced, so they will open and close in a first class condition. Some of the doors have broken hinges, drop bars, door closures needs adjustment made on the door and door locks repaired or replaced.

02-148038

- 1758*
- ① Repr Lock Main Entrance
 - ② Closure Repr / Repl Throughout
 - ③ Repl weather stripping West End

02 JUN 26 AM 9:53

9. FUNDS CHARGEABLE <i>AA</i>	10. SIGNATURE (Requesting Official) <i>Daniel L. Parker</i>
----------------------------------	--

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

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

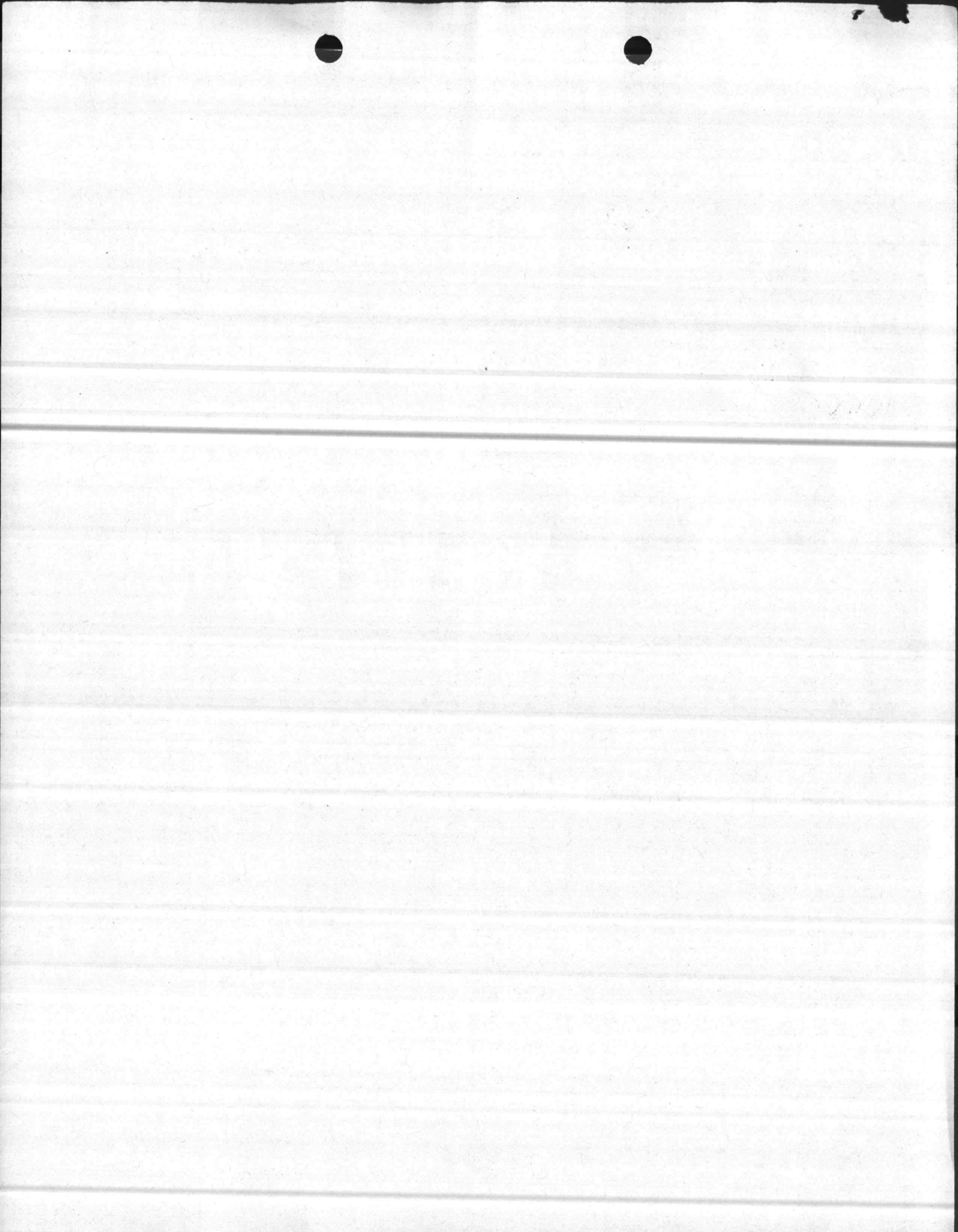
PART III—ACTION (Filled out by Requestor)

18. TO:	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	

1911

1911

1911



WORK REQUEST (MAINTENANCE MANAGEMENT)

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

(PW Department see Instructions in NAVFAC MO-321)

Requestor see Instructions on Reverse Side

CODE B062

PART I—REQUEST (Filled out by Requestor)

1. FROM <u>MCCS, Facilities/Maintenance</u>		2. REQUEST NO.
3. TO		4. DATE OF REQUEST
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START
6. FOR FURTHER INFORMATION CALL <u>Vern Swaim 451-1521</u>		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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

1. Request decorative railings be installed on the spectator section for safety of patrons at Bldg 89, Bonnyman Bowling Center. Fourteen railings are needed.

DATE: 24 MAY 02
TIME: 13136

02-1385 →

Review

9. FUNDS CHARGEABLE <u>APF</u>	10. SIGNATURE (Requesting Official) <u>[Signature] Parker</u>
-----------------------------------	--

PART II—COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
a. Labor	\$	15. <input type="checkbox"/> APPROVED. PROGRAMMING TO START IN _____ <input type="checkbox"/> APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN _____ IF AUTHORIZED BY 25TH OF _____ AND FUNDS ARE MADE AVAILABLE. <input checked="" type="checkbox"/> DISAPPROVED. (See Reverse Side)
b. Material	\$	
c. Overhead and/or Surcharge	\$	
d. Equipment Rental/Usage	\$	
e. Contingency	\$	
f. TOTAL	\$	16. SIGNATURE <u>[Signature]</u>
		17. DATE <u>11 June 02</u>

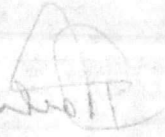
PART III—ACTION (Filled out by Requestor)

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	

1313

REVISION

THE



11700.05

Gen D/A

MR

09-1/38

TAB PLACEMENT HERE

DESCRIPTION:

Contract Data

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TAB PLACEMENT HERE

DESCRIPTION:

J.O. Pending

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BASE MAINTENANCE JOB ORDER

FY 2002	AG/SAG	REQ. CODE B048		REQUEST #		DIST. DATE - BY 3/18/02		FACILITY # 89	
AAC M67001	FA 23	WC	FC	OC/SOC	CAC	BRC	JN/LU EBLO	RON	RBC
WGC 5	TYPE OF WORK M&R		PROJECT #		SKETCH	PLAN	SPECIAL INSTRUCTIONS		

FOR FURTHER INFORMATION CONTACT: N. WIGGINS

TICKET # 02-118791

GENERAL JOB DESCRIPTION:

SHOP 74 TIC 02-118817

REPLACE COMPRESSOR FOR HVAC SYSTEM. RECOVER REFRIGERANT, START AND TEST UNIT

Request walk thru

START DATE: *ASAP 25 Mar 02* COMPLETE BY:

COMPLETION DATE: *5/3/02*

PHASE SEQUENCE			SUMMARY OF ESTIMATES					
PHASE NO.	WORK CTR	EST HRS	SHEET NO.	WORK CTR	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
1	53	24		53	24	745	8920	9665
2	74	6		74	6	186		186
				73	VEH	CHG	12	12
				72	EQUIP	CHG	143	143
				TOTALS	30	931	9075	\$10,006.00

CONTINUED ON SH _0_ THRU _0_

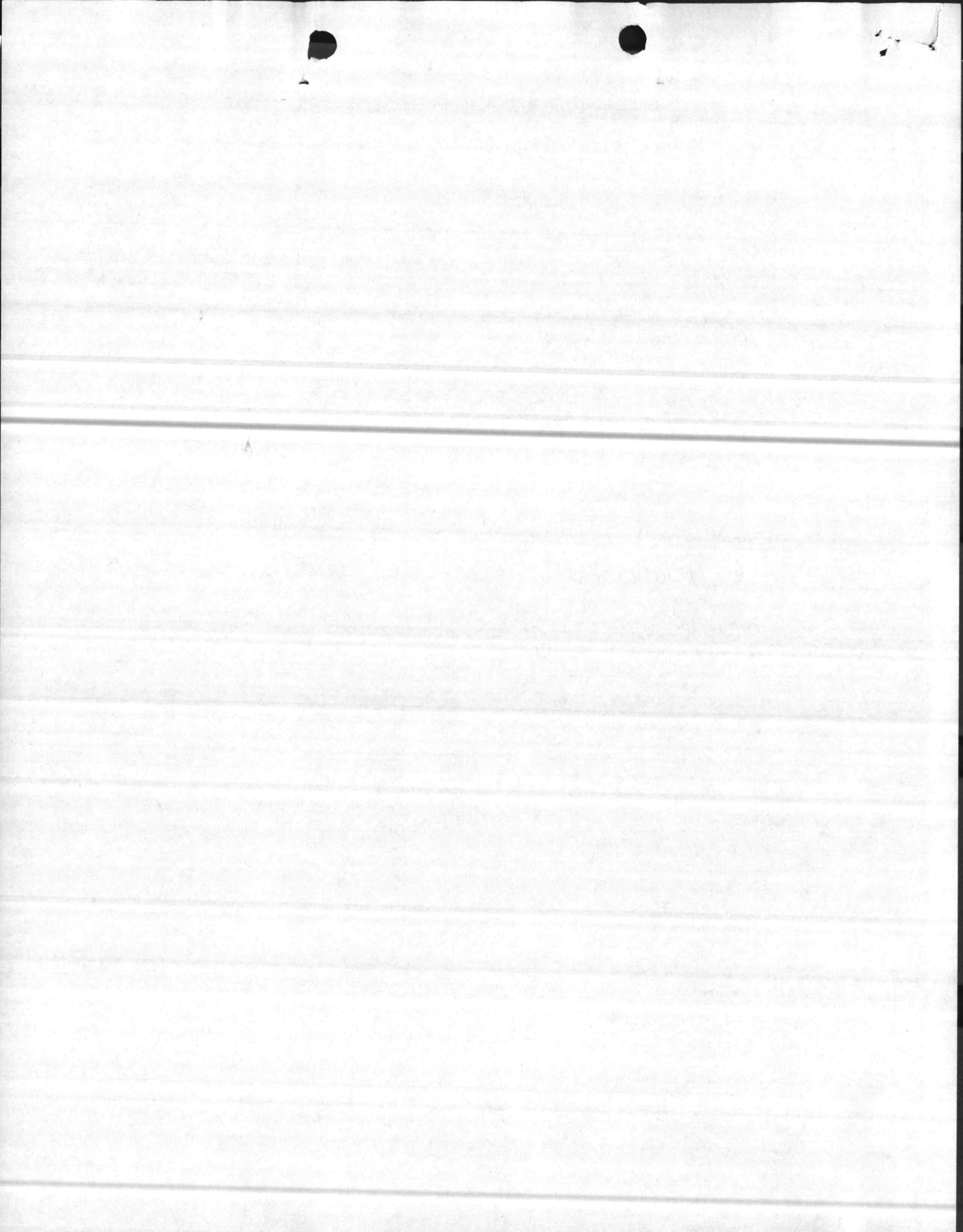
PREPARED BY: N. WIGGINS

DATE: 03/13/02

REVIEWED BY:

AUTHORIZED BY: *[Signature]* DATE: *15 Mar 02*

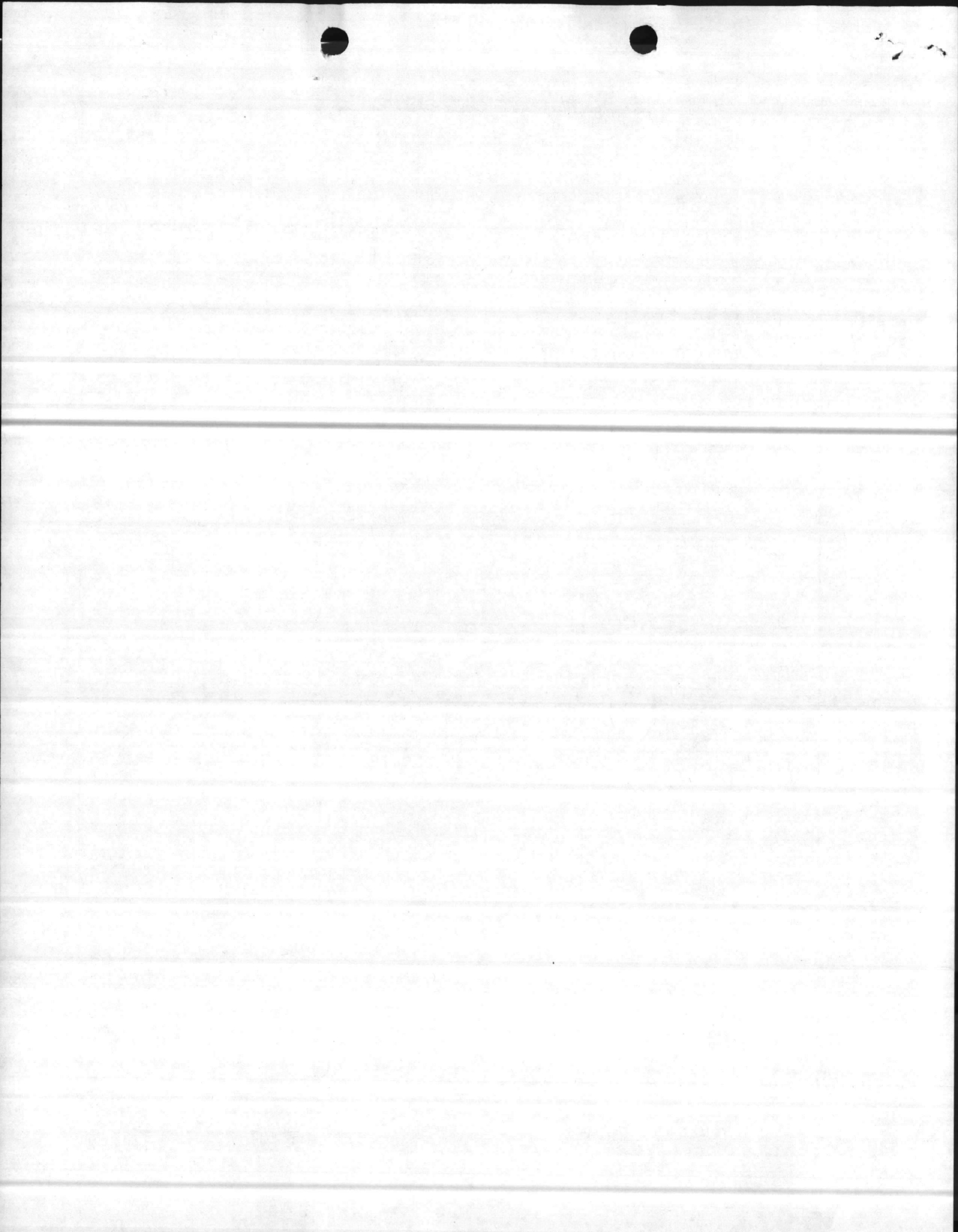
SHEET _1_ OF 2



BILL OF MATERIALS

DATE	TICKET #	UNIT	BLDG #	NATURE OF WORK	WORK CTR	
#####	02-118791	B048		REPLACE COMPRESSOR	53	
QTY	U/A	SIZE	MATERIAL REQUIRED		UNIT COST	TOTAL COST
1	EA	60HP	COMPRESSOR, TRANE MODEL CHRH600A-HAT 200 VOLTS, 3PH., 60 CY., TRANE PART NUMBER COM1628 TO BE U/L APPROVED, TO BE REMANUFACTURED AND HAVE ONE YEAR WARRENTY. TO BE EXCHANGED S.S TRANE PARTS. WILMINGTON NC PH 1-800-604-4822		8,720.00	8,720.00
1	EA		MISC MATERIAL		200.00	200.00
TOTAL MATERIAL COST THIS SHEET						8,920.00
TOTAL MATERIAL COST THIS SHEET AND ALL SHEETS						8,920.00

512



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

Ticket # 02-118791
02-118817

COMPRESSOR REQUISITION

DATE: 3-13-02 SHOP EMPLOYEE: WILLIAMS

PHONE: 451-3235 BLDG. # 89

UNIT MAKE: TRANE UNIT MODEL: _____

UNIT SERIAL NO. _____

COMPRESSOR MAKE: TRANE COMPRESSOR MODEL: CRHR600A-4HAT

COMPRESSOR SERIAL NO.: A7A60L2214

TANDEM: NO

VOLTAGE: 200V PH: 3 HZ: 60 RUNNING AMPS: _____

CONTROL VOLTAGE: 110 NO OF TERMINALS: 6 CONTROL SAFETY MODULE POWER: _____

REFRIGERANT CONNECTIONS: SWEAT: ROTO LOK: VALVE:

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

UNLOADERS: LOCATION: HEADS OF COMP. NUMBER: 2 REFRIGERANT: 22

REASON FOR REPLACEMENT: GROUNDED: SHORTED: BROKEN VALVES:

DRIERS NEEDED LIQUID LINE: SIZE: 100 TYPE: _____ QTY: 4

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

CONTACTORS NEEDED (TYPE): CUTLER HAMMER # C832JN6
6-35-2 CONTACT KIT. SERIES B1

AMPS: 120 VOLTAGE: _____

SHOP #74 YES NO

DESCRIPTION: com 1628

\$ 8720.00
CTR 1575
\$525.00
BAS-01650
\$60.00

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: _____

1950

1951

1952

1953

1954

1955

1956

1957

1958

1959

1960

0118

BASE MAINTENANCE JOB ORDER

1st Ammedment

FY 01	AG/SAG	REQ. CODE B048		REQUEST #		DIST. DATE - BY 5-14-01		FACILITY # 89	
AAC M67001	FA 23	WC	FC	OC/SOC	CAC	BRC	JN/LU A381	RON	RBC
WGC 5	TYPE OF WORK M&R		PROJECT #		SKETCH NO	PLAN	SPECIAL INSTRUCTIONS		

FOR FURTHER INFORMATION CONTACT: N. WIGGINS

TICKET # 01-23073
01-23207

GENERAL JOB DESCRIPTION:

Ammendment To JON A381
REPLACE COMPRESSOR FOR HVAC SYSTEM. RECOVER REFRIGERANT, START AND TEST
FOR PROPER OPERATION

Addition hour for installing contactor

Work Order

START DATE: *AN*

COMPLETE BY:

COMPLETION DATE: 5-18-01

PHASE SEQUENCE			SUMMARY OF ESTIMATES					
PHASE NO.	WORK CTR	EST HRS	SHEET NO.	WORK CTR	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
	ADD			ADD				
1	53	14		53	14	435		435
				73	VEH	Chg	7	7
				TOTALS	14	435	7	\$442.00

CONTINUED ON SH_0_ THRU_0_

PREPARED BY: ELL

DATE: 05/09/01

REVIEWED BY: *ncw*

AUTHORIZED BY: *[Signature]*

DATE: 5/11/01

SHEET 1_ OF _

10-18-01

10-18-01

Woke up

LA

10/18

10/18/01

10/18/01

11

88

APR 19 1957

14. The machine has to replace the company

The machine has to replace the company
contractor ~~and~~ the company

10/20/51

F. E. White

BASE MAINTENANCE JOB ORDER

FY 01	AG/SAG	REQ. CODE B048		REQUEST #		DIST. DATE - BY 4/02/01		FACILITY # 89 89	
AAC M67001	FA 23	WC	FC	OC/SOC	CAC	BRC	JN/LU A381	RON	RBC
WGC 5	TYPE OF WORK M&R		PROJECT #		SKETCH NO	PLAN	SPECIAL INSTRUCTIONS		

FOR FURTHER INFORMATION CONTACT: N. WIGGINS

TICKET # 01-23073
01-23207

GENERAL JOB DESCRIPTION:

REPLACE COMPRESSOR FOR HVAC SYSTEM. RECOVER REFRIGERANT, START AND TEST FOR PROPER OPERATION

AT WORK: Shop to order material

START DATE: *AN* COMPLETE BY: COMPLETION DATE:

PHASE SEQUENCE		SUMMARY OF ESTIMATES						
PHASE NO.	WORK CTR	EST HRS	SHEET NO.	WORK CTR	LABOR HRS	LABOR COST	MATERIAL COST	TOTAL COST
1	53	24		53	24	708	8241	8949
2	72	6		72	6	177		177
				73	VEH	CHG	12	12
				74	EQUIP	CHG	143	143
				SHOP PROCURE MATERIAL				
TOTALS					30	885	8396	\$9,281.00

CONTINUED ON SH_0_ THRU_0_

PREPARED BY: *ncw*

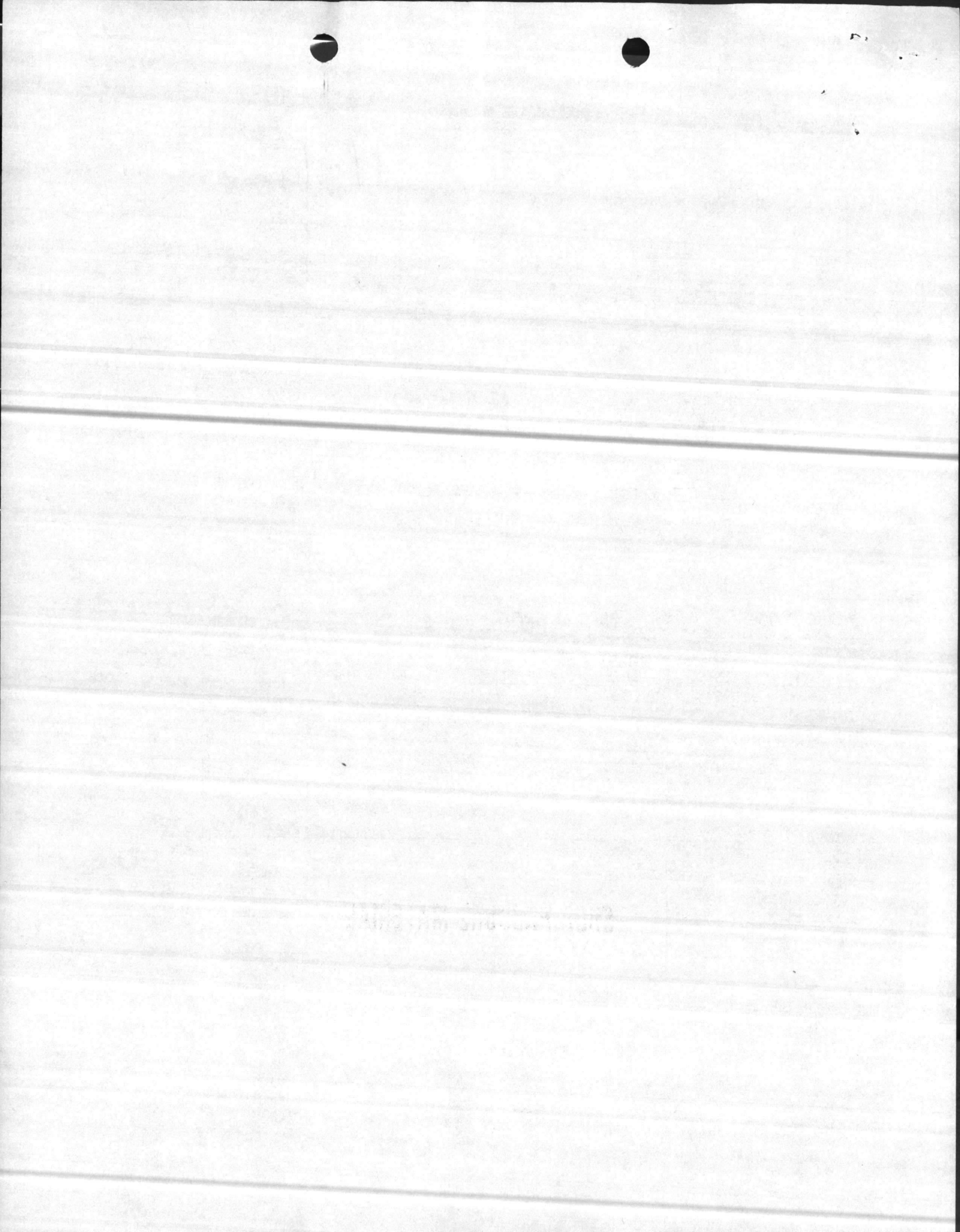
DATE: 3-27-01

REVIEWED BY:

AUTHORIZED BY: *[Signature]*

DATE: 3/29/01

SHEET 1_ OF 2



745

MAINTENANCE COST ESTIMATE WORKSHEET
 MCBCL 11011 (REV. 1-81)

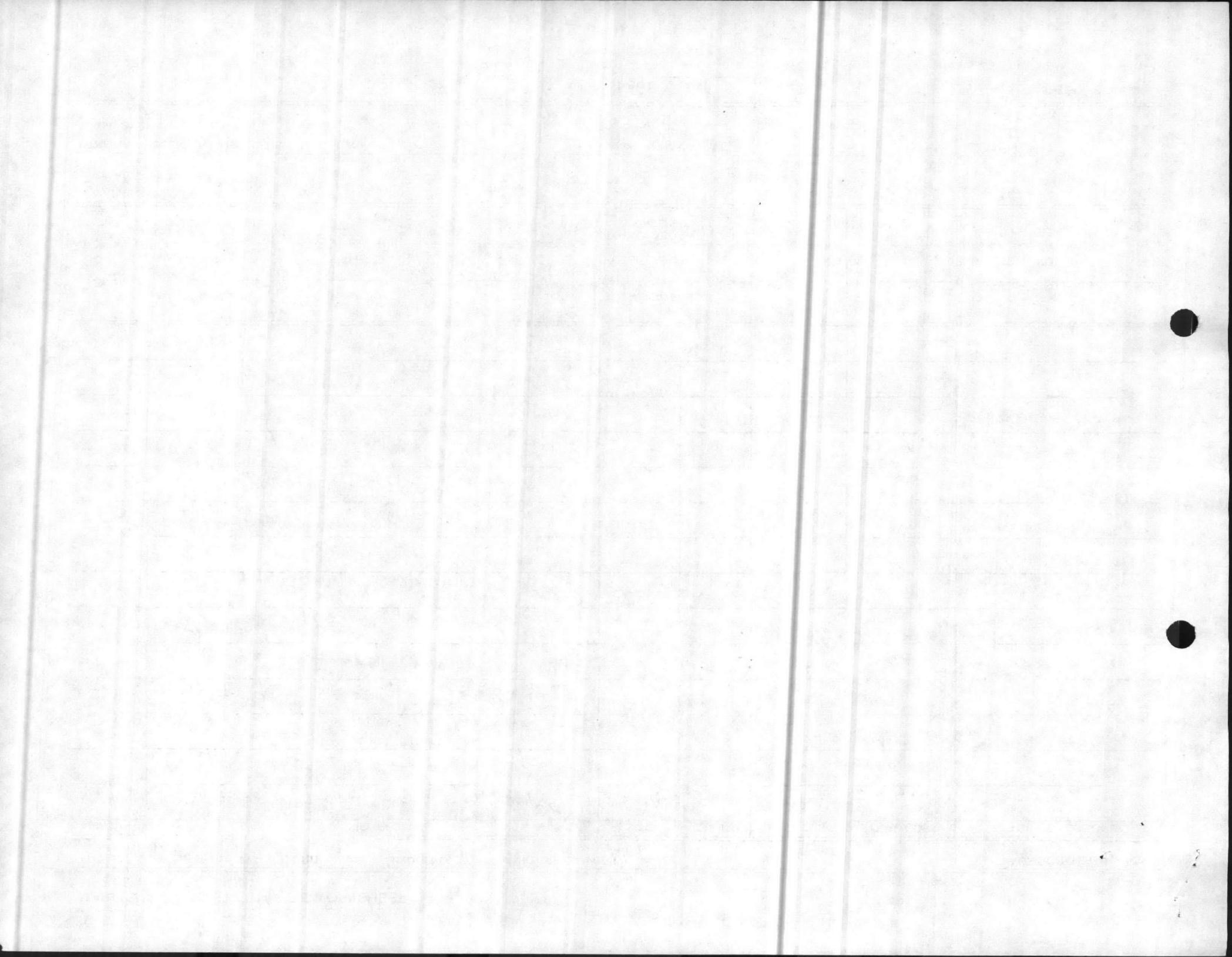
DATE 3-27-01 REQ. NO. UN# B048 BLDG. NO. 89 NATURE OF WORK Repla Compressor WORK CENTER 53

AMOUNT	MATERIEL REQUIRED	SIZE	UNIT	UNIT COST	TOTAL COST	FOR SUPPLY USE ONLY
1	Compressor, TRANE, Model # CRHR600A-4HAT, 60HP, 200 Volts, 3 Phase, 60 Cy. Unit to Be Remanufactured and Have one year warrenty, To Be UL Approved with Elect uploading on Two Heads,	60HP	EA		8241.00	
SS	Brady TRANE Wilmington N.C. Ph 1-800-604-4822 Misc Material				\$200.00	

24	MAN HOURS @ 29.49 PER HOUR	TOTAL MAN DAYS	TOTAL MATERIEL	J.O. SERIAL NO.
	MAN HOURS @ PER HOUR		TOTAL LABOR	
	TOTAL MAN HOURS		TOTAL LABOR AND MATERIEL	

REMARKS:

OTHER WORK CENTERS INVOLVED 72 SIGNATURE OF P & E A. Wiggler DATE 3-27-01



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

JON
A381

COMPRESSOR REQUISITION

DATE: 3/28/01 SHOP EMPLOYEE: Williams R.S

PHONE: 451-3235 BLDG. # 89 TICKET# 01-23073

UNIT MAKE: Trane UNIT MODEL: CGACD126RANLL623G

UNIT SERIAL NO. J86M73122

COMPRESSOR MAKE: _____ COMPRESSOR MODEL: CRHR600A-4HAT

COMPRESSOR SERIAL NO.: 16184

TANDEM: _____

VOLTAGE: 200 PH: 3 HZ: 60 RUNNING AMPS: _____

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

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): 2 (eq)

AMPS: _____ VOLTAGE: 120

SHOP #74 YES NO

DESCRIPTION: _____

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: _____

72 Tic # 01-23207

01-28073

3