

## FILE FOLDER

### DESCRIPTION ON TAB:

438

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Jo. completed

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MISC

PERMCLIP  
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**DESCRIPTION:**

J.O. CARD

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BLDG CLASS 2 PROPERTY RECORD  
 (004) UIC..M67001 (001) PR NO.....2-04112  
 MCB CAMP LEJEUNE NC (005) FACILITY NO..438  
 (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.N10

GENERAL INFORMATION  
 (007) ACTION.....CAP-IMPROV  
 (008) FAM HOUSING....NO  
 (009) EE DATE.....15 OCT 81  
 (011) PR REVIEW DATE.15 OCT 81  
 (010) FACILITY NAME..  
 ADMIN-ACD GEN INS-BLD

ACQUISITION  
 (201) ESTATE.....13 OTHER MIL FUND  
 (202) ACQ CONTRACT...NOY7122  
 (203) ACQ DATE.....01 SEP 43  
 (204) GOVT COST..... \$14,040  
 (207) LAND CCN.....91140

MEASUREMENTS  
 (301) LENGTH.... 120 FT  
 (302) WIDTH..... 27 FT  
 (303) HEIGHT.... 13 FT  
 (304)/AREA..... 3,240 SF  
 (308) AREA UM...  
 (305) STORIES... 01  
 (307) IRREGULAR. NO

CONSTRUCTION  
 (401) YEAR BUILT.....1943  
 (402) CONSTRUCTION TYPE..PERMANENT  
 (403) YEAR IMPROVED.....  
 (404) ABMP CODE.....  
 (409) PROJECT NO.....  
 (410) HISTORIC IND...

MAINTENANCE  
 (701) MAINT UIC..M67001 (702) PRIME USE....61071 (703) MFC...4 USMC

STATUS / UTILIZATION  
 (502) CATEGORY CODE...61071 (501) USE..REGMT/GROUP HQ (MARCOR)  
 (510) USER UIC.....M67001.....MCB CAMP LEJEUNE NC

AREA/SF*	OTHER/	ALT/	DEF CODES
ADEQ(515)	(516)	(517)	(524)
SBST(518).....1,086.00	(519)	(520)	(525)B03 A30 B26
INAD(521)	(522)	(523)	(526)
TOTAL	1,086.00		

TOTAL

1.086.00

INAD(521)

(522)

(523)

(526)

282T(518).....1,086.00 (519)

(520)

(520)

(525)803 A30 B56

ADEQ(515)

(516)

(517)

(524)

AREAS\*#

OTHER\

ALTA

DEF CODES

(701) MAINT UIC..M67001

(702) PRIME USE...61071

(703) MEC...4 USMC

(502) CATEGORY CODE...61071

(501) USE..REGMT\GRUP HQ (MARGOR)

STATUT\ UTILITY

(403) YEAR IMPROVED.....

(402) CONSTRUCTION TYPE..PERMANENT

(409) PROJECT NO.....

(401) YEAR BUILT.....1943

(404) ABMP CODE.....

(507) LAND CN...9140

(504) GOVT COST.....814,040

814,040

(503) ACQ DATE.....01 SEP 43

01 SEP 43

(502) ACQ CONTRACT...NOY155

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

13 OTHER MIL FUND

(107) MAP GRID..N10

(105) AC.....05

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

0735 CAMP LEJUNE

(103) COUNTY...133 ONSLOW

(102) STATE...37 NORTH CAROLINA

37 NORTH CAROLINA

(101) COUNTRY..02 UNITED STATES

02 UNITED STATES

LOCATIONS

GENERAL INFORMATION

(107) MAP GRID..N10

(105) AC.....05

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

0735 CAMP LEJUNE

(103) COUNTY...133 ONSLOW

(102) STATE...37 NORTH CAROLINA

37 NORTH CAROLINA

(101) COUNTRY..02 UNITED STATES

02 UNITED STATES

BLDC

(004) UIC..M67001

MCB CAMP LEJUNE NC

HADNOT POINT

(106) SPEC AREA...DA

(002) FACILITY NO..438

(001) PR NO.....2-04112

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.....2-04112  
(005) FACILITY NO..438  
(106) SPEC AREA....DA  
HADNOT POINT

(502) CATEGORY CODE...44112 (501) USE..STG AIR/GRD ORG UTS MARCOR

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

	AREA/SF*	OTHER/TC	ALT/SH	DEF CODES
ADEQ(515)	(516)	(517)	(524)	
SBST(518).....	1,070.00	(519).....9,045.00	(520).....9.00	(525)B03 A30 B26
INAD(521)	(522)	(523)	(526)	
TOTAL	1,070.00	9,045.00	9.00	

(502) CATEGORY CODE...73040 (501) USE..LAUNDRY/DRY CLEANING PLT

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

	AREA/SF*	OTHER/	ALT/	DEF CODES
ADEQ(515).....	1,084.00	(516)	(517)	(524)B03 A30 B26
SBST(518)	(519)	(520)	(525)	
INAD(521)	(522)	(523)	(526)	
TOTAL	1,084.00			



BLDG

CLASS 2 PROPERTY RECORD

(C-D-1-T-1-V-U-A-T-I-D-N)

(004) UIC..M67001

MCR CAMP LEJUNE NC

(001) PR NO.....2-0411S

(002) FACILITY NC..438

(100) SPEC AREA...DA

HADNOT POINT

(502) CATEGORY CODE...4411S (501) USE..2TG AIRGRD ORG UTS MARGOR

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

AREA2F*	OTHERA7C	ALVSH	DEF CODES
ADEQ(512)	(516)	(517)	(524)
2B2T(518)	1,070.00 (519)	9,042.00 (520)	9.00 (525)B03 A30 B26
INAD(521)	(522)	(523)	(526)
TOTAL	1,070.00	9,042.00	9.00

(502) CATEGORY CODE...73040 (501) USE..LAUNDRYDRY CLEANING PLT

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

AREA2F*	OTHERA7C	ALV	DEF CODES
ADEQ(512)	1,084.00 (516)	(517)	(524)B03 A30 B26
2B2T(518)	(519)	(520)	(525)
INAD(521)	(522)	(523)	(526)
TOTAL	1,084.00		

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**DESCRIPTION:**

work Requests

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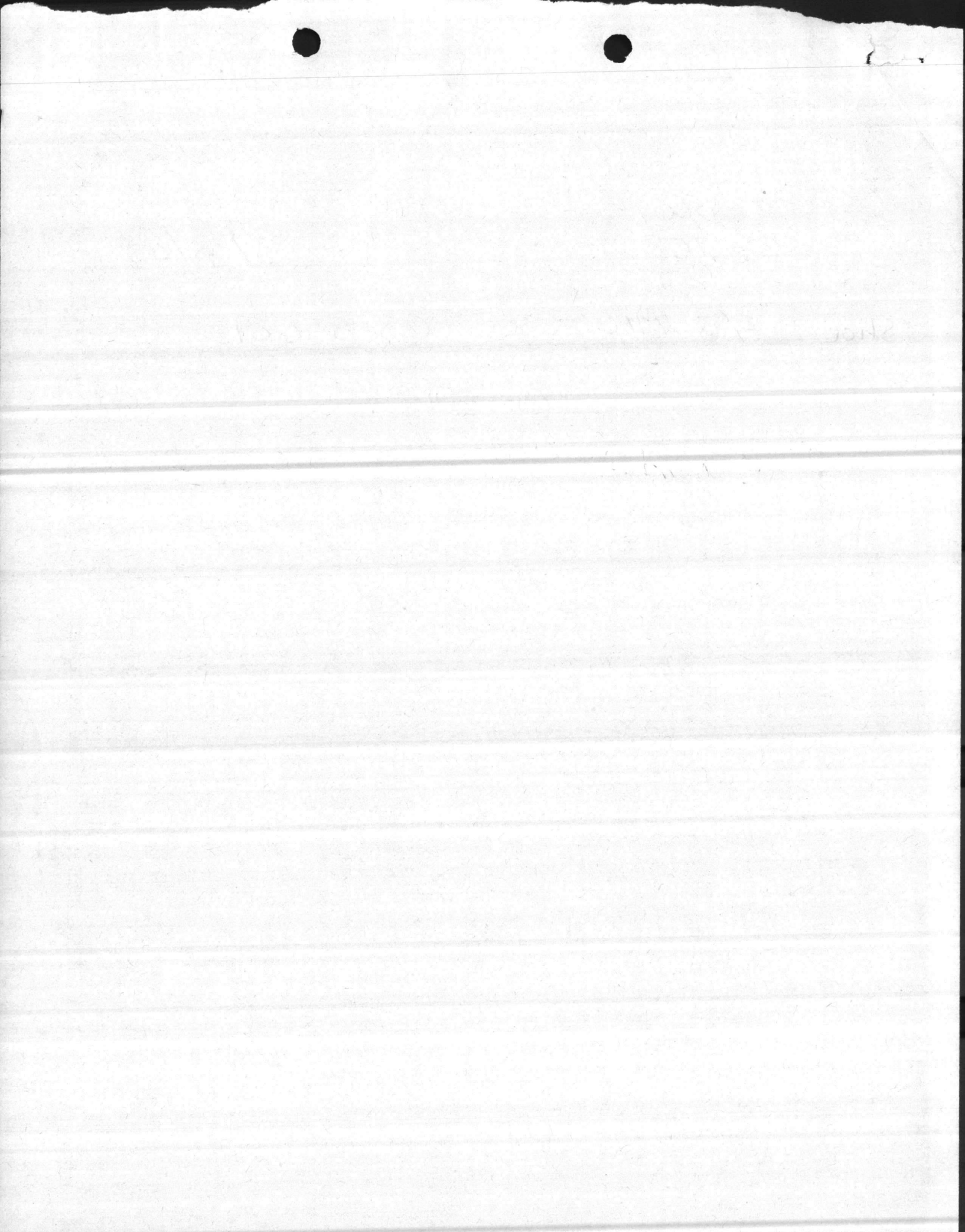
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030227

WORK REQUEST (MAINTENANCE MANAGEMENT)  
NAVFAC 9-11014/20 REV. 2-68) S/N 0106-LF-002-7510  
Supercedes NAVDOCKS 2351

(PW DEPARTMENT SEE INSTRUCTIONS)  
in NAVFAC MO-321)

### 2D MARINE DIVISION WORK REQUEST

Requestor see Instructions on Reverse

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

1. FROM <b>Commanding Officer 6th Mar Reg</b>		2. REQUEST NO. <b>D009-108-03</b>	
3. TO <b>Commanding General MCB CLNC</b>		4. DATE OF REQUEST <b>26-Feb-03</b>	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START <b>IMMEDIATELY</b>	
6. FOR FURTHER INFORMATION CALL <b>Sgt Ward 451-3055</b>		7. SKETCH/PLAN ATTACHED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	

(Including location, type, size, quantity, etc.)

LOCATION : Building 438

DESCRIPTION : Front, Middle Loading Hatch Damaged/Unusable.

*68 1/2 W 87 1/2 H insp*

**FEB 27 2003**

2D Marine Division Facilities  
Date in \_\_\_\_\_  
Date of \_\_\_\_\_  
Signature: *[Handwritten Signature]*

JUSTIFICATION : Safety of equipment inside building. Structural integrity. Building upkeep.

03-55629

9. FUNDS CHARGEABLE	10. SIGNATURE <i>[Signature]</i> <small>(Requesting Official)</small> 2nd Lt. Snyder, JM, S-4 Facilities Officer
---------------------	---

#### 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	
a. Labor	\$	YES	NO
b. Material	\$	APPROVED.	PROGRAMMING TO START IN
c. Overhead and/ or Surcharge	\$	APPROVED.	BASED ON PRESENT WORKLOAD, THIS JOB CAN BE
d. Equipment Rental/Usage	\$		PROGRAMMED TO START IN _____, IF
e. Contingency	\$		AUTHORIZED BY 25TH OF _____ AND FUNDS
			ARE MADE AVAILABLE.
f. TOTAL	\$	16. SIGNATURE	17. DATE
		DISAPPROVED. (See Reverse Side)	

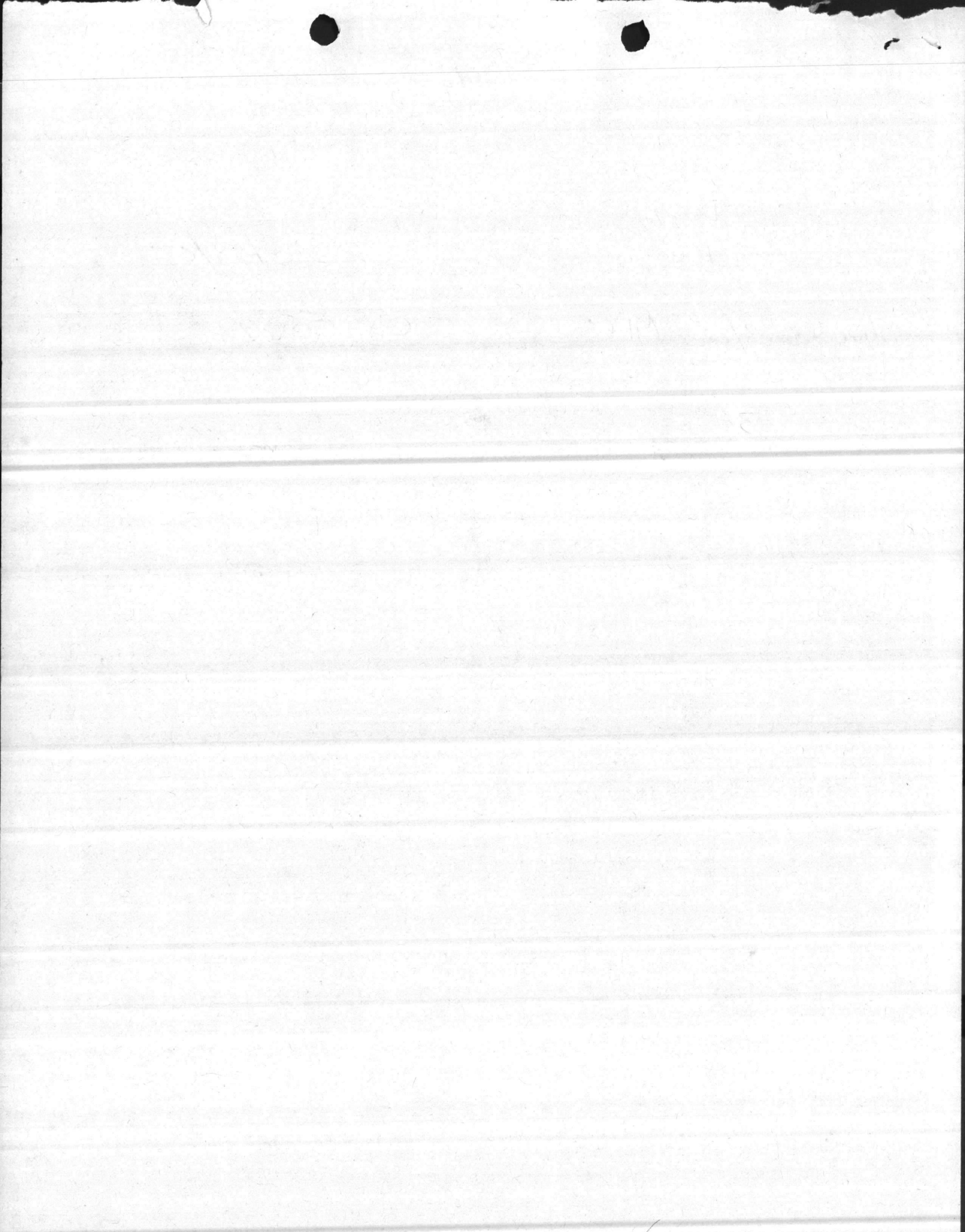
#### PART III--ACTION (Filled out by Requestor)

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

(See Part IV on Reverse Side)

PS Dec 20







030227

WORK REQUEST (MAINTENANCE MANAGEMENT)  
NAVFAC 9-11014/20 REV. 2-88) S/N 0105-LF-002-7510  
Supersedes NAVDOCKS 2351

(PW DEPARTMENT SEE INSTRUCTIONS)  
In NAVFAC MO-321)

### 2D MARINE DIVISION WORK REQUEST

Requestor see Instructions on Reverse

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

1. FROM <b>Commanding Officer 6th Mar Reg</b>		2. REQUEST NO. <b>D009-106-03</b>
3. TO <b>Commanding General MCB CLNC</b>		4. DATE OF REQUEST <b>25-Feb-03</b>
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START <b>IMMEDIATELY</b>
6. FOR FURTHER INFORMATION CALL <b>Sgt Ward 451-3055</b>		7. SKETCH/PLAN ATTACHED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

(Including location, type, size, quantity, etc.)

LOCATION : Between 438 and 412

DESCRIPTION : Sidewalk caved into a sinkhole.

*INSF*

**FEB 27 2003**

in Dept of Maintenance  
Division Facilities  
Date in \_\_\_\_\_  
Date Out \_\_\_\_\_  
*[Signature]*

JUSTIFICATION : Safety of Marines. Upkeep of the grounds.

*5' x 5' SECTION*

*03-55628*

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <i>[Signature]</i> 2nd Lt. Snyder, 8-4 Facilities Officer
---------------------	---

#### 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
a. Labor	\$	YES NO
b. Material	\$	APPROVED. PROGRAMMING TO START IN
c. Overhead and/ or Surcharge	\$	APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE
d. Equipment Rental/Usage	\$	PROGRAMMED TO START IN _____, IF
e. Contingency	\$	AUTHORIZED BY 25TH OF _____ AND FUNDS
f. TOTAL	\$	ARE MADE AVAILABLE.
16. SIGNATURE		17. DATE

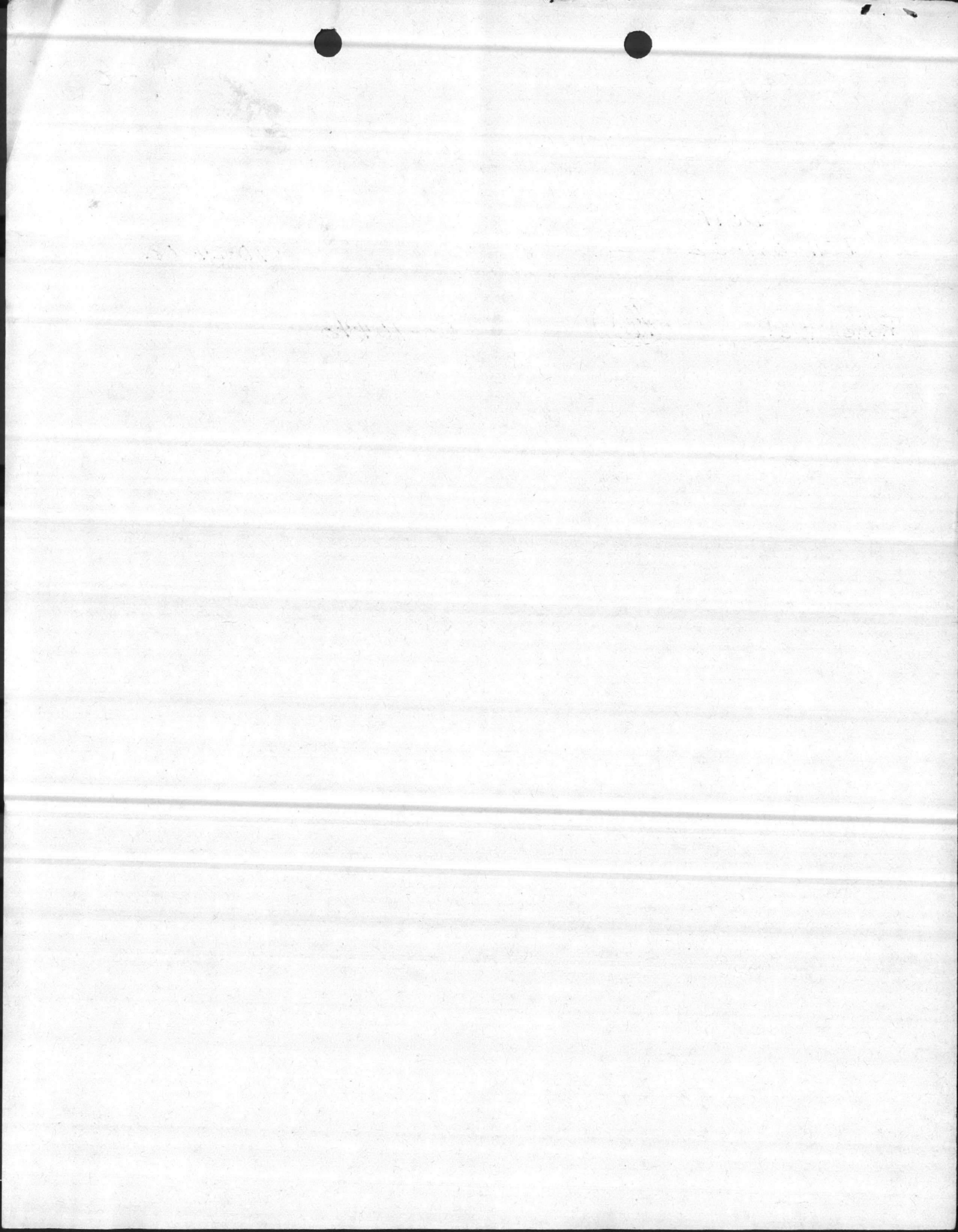
#### PART III--ACTION (Filled out by Requestor)

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

(See Part IV on Reverse Side)

80 512 19





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

(PW DEPARTMENT SEE INSTRUCTIONS)  
 (in NAVFAC MO-321)

2002 OCT 23 PM 2 17

2B MARINE DIVISION WORK REQUEST

Requestor see Instructions on Reverse

03-10448

<b>PUBLIC WORKS DIV WORK RECEPTION</b>		<b>PART I --REQUEST (Filled out by Requestor)</b>	<b>D011</b>
1. FROM Commanding Officer, 2d Battalion, 6th Marines			2. REQUEST NO. D011-081-02
3. TO Commanding General, MCB(Attn:BMO)			4. DATE OF REQUEST 23-Oct-02
5. REQUEST FOR COST ESTIMATE	<i>Performance of Work</i>		5a. REQUEST WORK START IMMEDIATE
6. FOR FURTHER INFORMATION CALL Cpl Roberts@451-2171			7. SKETCH/PLAN ATTACHED YES NO x

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)  
 LOCATION : Blg. 438

DESCRIPTION : Need exterminator to spray building for ants

FOR INFORMATION  
 Division Facilities OCT 24 2002  
 Date in  
 Date on  
*Ken B...*

*Reviewed*

JUSTIFICATION : Health

NOTE:

9. FUNDS CHARGEABLE	10. SIGNATURE Sgt. Zachary R. Dona <i>Zachary R. Dona</i> (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
a. Labor	\$	YES NO
b. Material	\$	15. (See Reverse Side)
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
21. SIGNATURE	22. DATE

(See Part iv on Reverse Side)

5005 OCT 23 PM 5 17

PUBLIC WORKS DIV  
WORK RECEPTION

*[Faint handwritten text]*

*[Faint handwritten text]*

3 Dec 02  
 1000

**2D MARINE DIVISION WORK REQUEST**

Requestor see Instructions on Reverse

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

1. FROM <b>Commanding Officer, 2ND BATTALION 6TH MARINES</b>		2. REQUEST NO. <b>D011-114-02</b>	
3. TO <b>COMMANDING GENERAL MCB, (ATTN, BMO)</b>		4. DATE OF REQUEST <b>26-Nov-02</b>	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START <b>IMMEDIATE</b>	
6. FOR FURTHER INFORMATION CALL <b>Cpl Myers@451-2171</b>		7. SKETCH/PLAN ATTACHED YES <input type="checkbox"/> <input checked="" type="checkbox"/>	
8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.) <b>LOCATION : BLDG 438</b>			

DESCRIPTION : EST. 10 FLORESCENT LIGHT BULBS NEED TO BE CHANGED.

JUSTIFICATION: MAINTAIN A WELL LIT SAFE WORK ENVIRONMENT

07-23923

DEC 02 2002  
 [Signature]  
 Capt usmc

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) <b>LCpl SHANE D KENYON</b>
---------------------	---

**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	
a. Labor	\$	YES	NO
b. Material	\$	APPROVED.	PROGRAMMING TO START IN
c. Overhead and/ or Surcharge	\$	APPROVED.	BASED ON PRESENT WORKLOAD, THIS JOB CAN BE
d. Equipment Rental/Usage	\$		PROGRAMMED TO START IN . IF
e. Contingency	\$		AUTHORIZED BY 25TH OF AND FUNDS
f. TOTAL	\$	DISAPPROVED. (See Reverse Side)	
		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) NAVCOMPT 140      OTHER		HAS BEEN	HAS B BEEN      WILL BE PERFORMED
		CANCELED	DEFERRED      BY OTHERS
21. SIGNATURE		22. DATE	

(See Part iv on Reverse Side)

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

5800  
IEPO  
OCT 25 2002

MEMORANDUM

From: Public Works Officer, Marine Corps Base, Camp Lejeune  
To: Commanding Officer, 1<sup>st</sup> Battalion, 6<sup>th</sup> Marines, 2<sup>nd</sup> Marine  
Division, Camp Lejeune  
Via: Commanding General, 2<sup>nd</sup> Marine Division, 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: Sliding Bay Door

b. Location: Bldg 438 Exterior

c. Nature of damage: Hit by vehicle

d. Estimated cost:

Material	\$200.00
20% surcharge	\$40.00
Labor	\$834.00
30% surcharge	\$250.00
<b>TOTAL</b>	<b>\$1,324.00</b>

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).

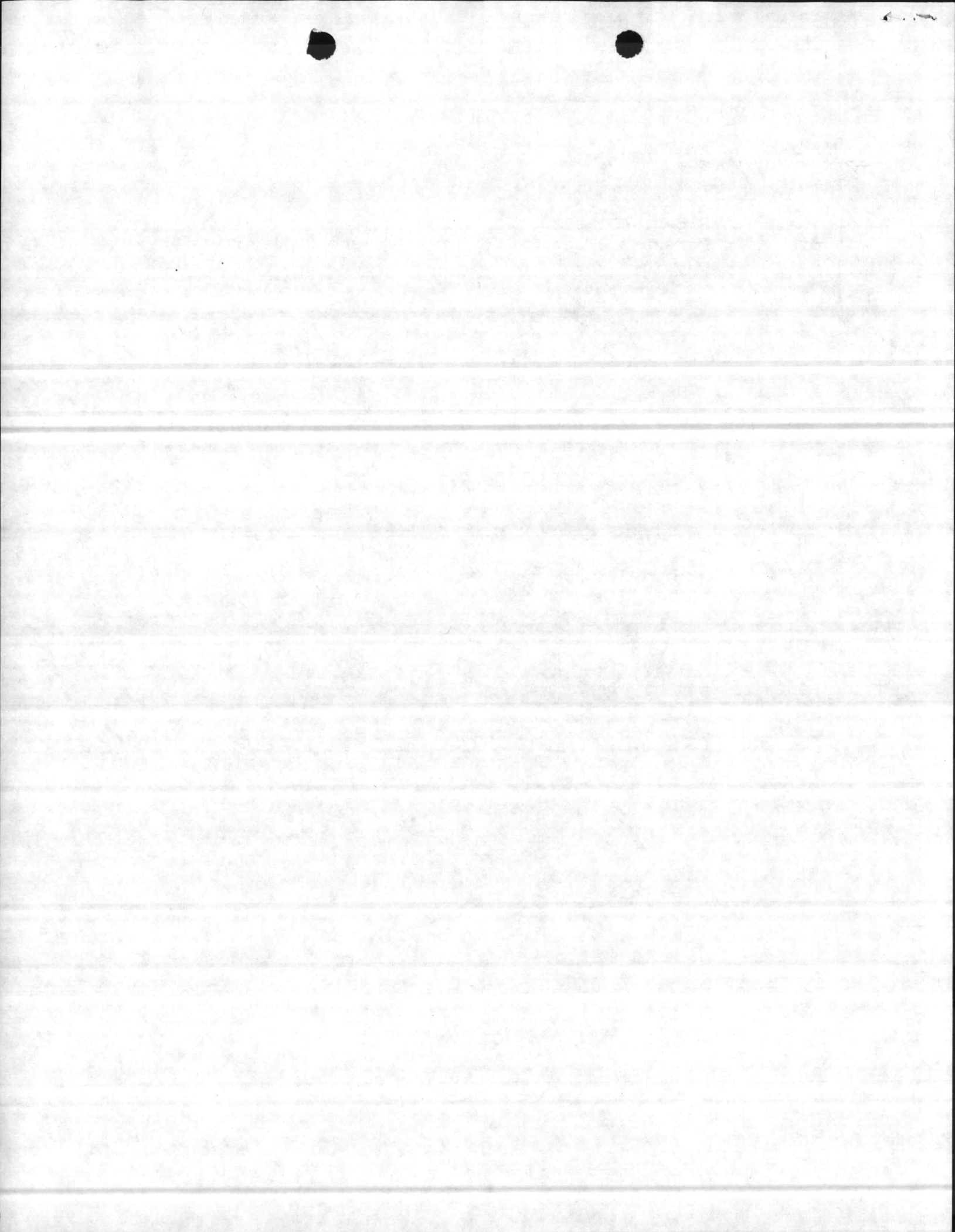
E. W. WINBERRY  
Director, Operations Branch

205 6-17-11

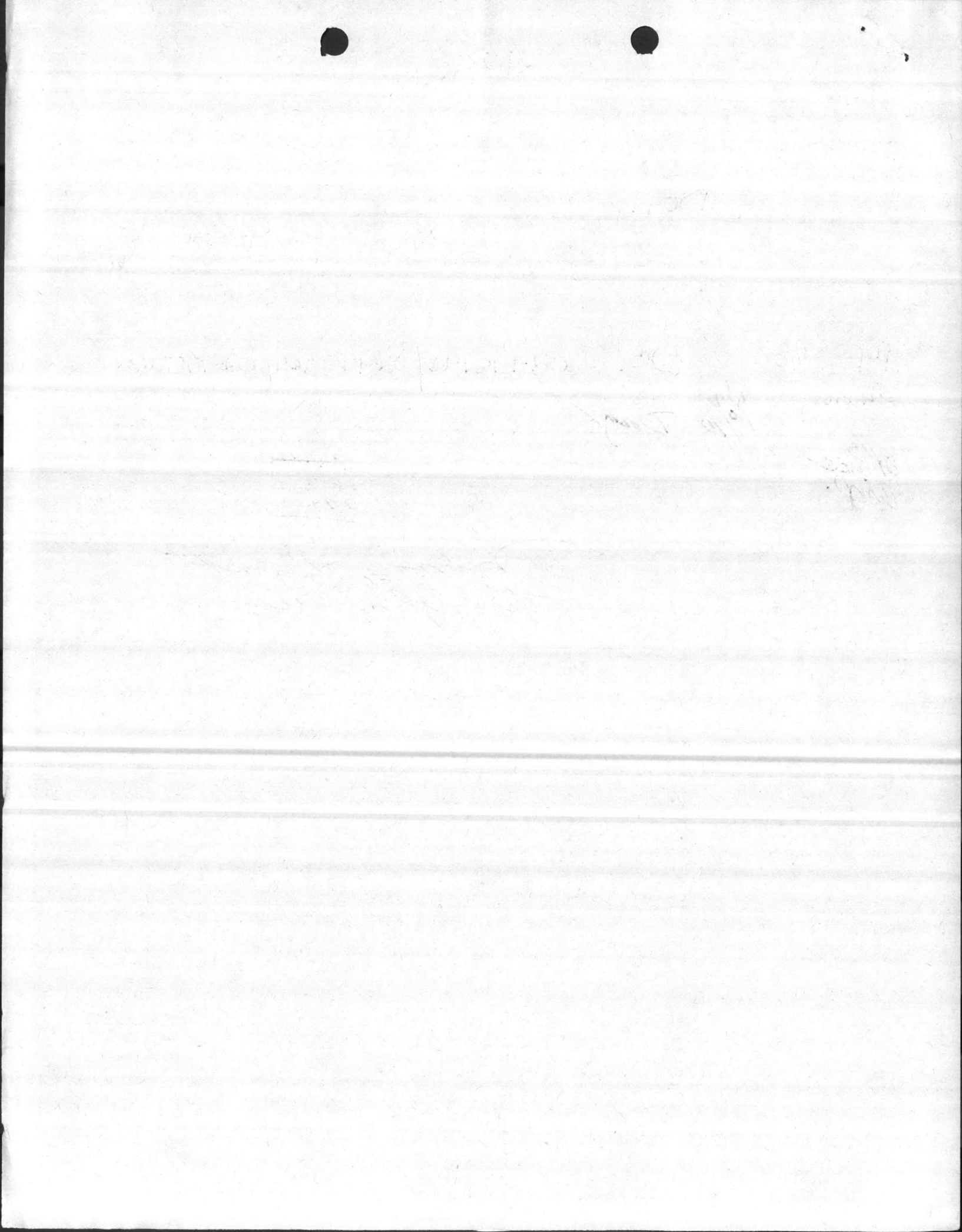
Blind Copy to:  
⇒ Work Reception  
P&E (R. Whaley)

Writer: D. Brown, 451-0872

Typist: C. Marentis, 21Oct02, D:\letters\damage\2002, Maximo#02-  
175146







Work Order Ticket

**\*\*EMERGENCY WORK\*\***

Shop: 41

Work Order: 02-175264  
POC: CPL ROBERTS  
Phone: 451-2171/0722  
Entered By: JOHNSONAD

Status: COMP  
Report Date: 06-SEP-2002 08:27 AM  
Respond By: 06-SEP-2002 04:27 PM  
Target Comp Date:

Service Requested: BOARD UP DOOR OPENING  
No additional information available.

*Sending to P&E with tickets 02-175146 02-175265*

Building/Location: 438 Bldg Descrip: GEN STG A/G/ORG  
Equipment #: Equip Descrip:  
Actual Location: BAY DOOR MATERIAL COST \$103.77  
PM #: Job Plan #:

Assigned To: BATSONWE Supervisor: CRUMPEW Craft: CARP

FINANCIAL INFORMATION

For ISD Use Only

For SSC Use Only

JON: CLM1



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

Job Started: \_\_\_\_\_ Job Completed: \_\_\_\_\_ Units: \_\_\_\_\_

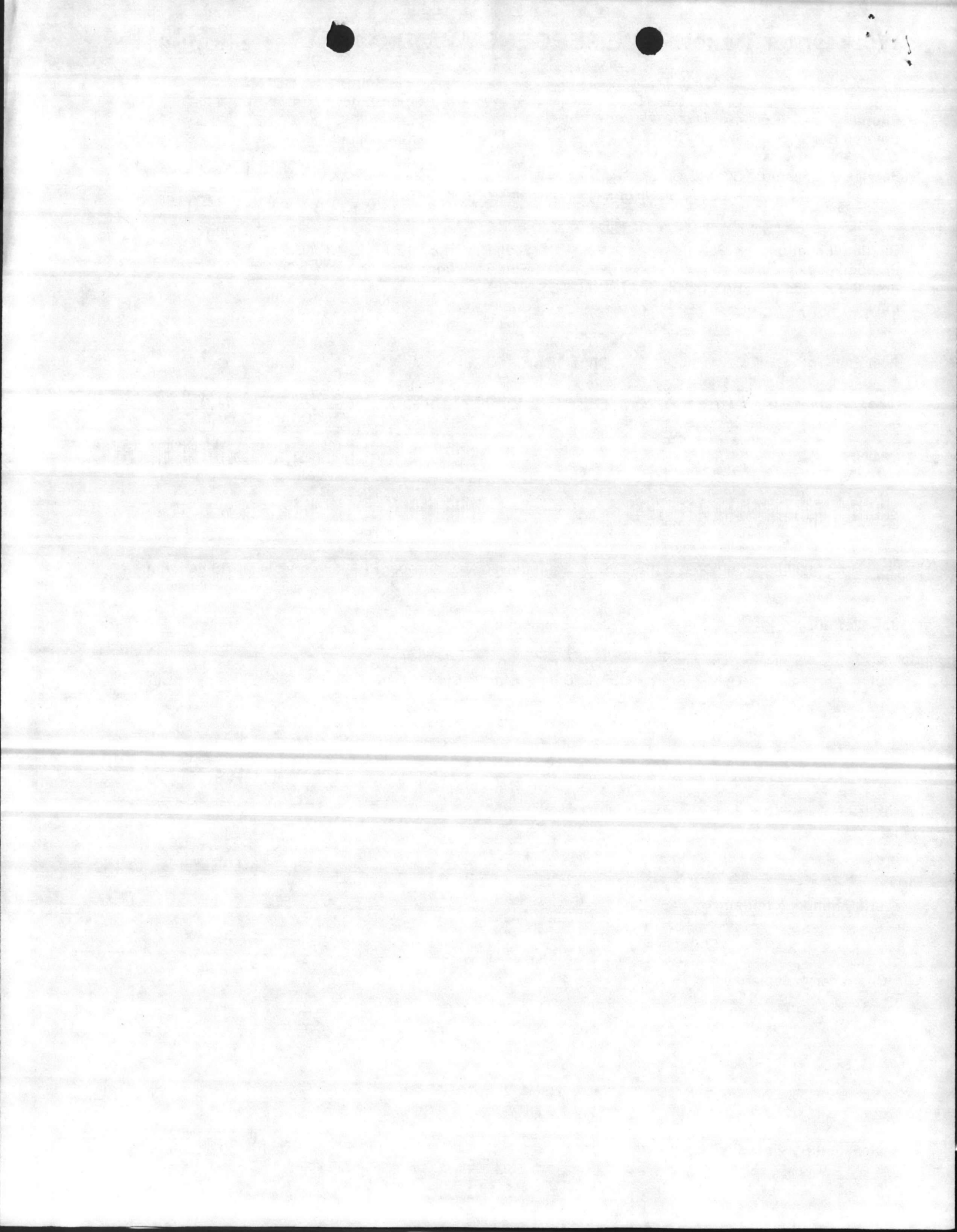
Name	Date	Start1	Stop1	Date	Start2	Stop2	Date	Start3	Stop3	Date	Start4	Stop4

Work Remarks (continue on back if needed): \_\_\_\_\_

Customer Acceptance:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_





# Work Order Ticket **\*\*EMERGENCY WORK\*\***

Shop: 63

Work Order: 02-175146 Status: INPRG  
POC: CPL ROBERTS Report Date: 05-SEP-2002 03:29 PM  
Phone: 451-2171/0722 Respond By: 05-SEP-2002 11:29 PM  
Entered By: JOHNSONAD Target Comp Date:

Service Requested: DOOR FRAME AND TRACK RIPPED OFF THE WALL  
No additional information available.

Building/Location: 438 Bldg Descrip: GEN STG A/G/ORG  
Equipment #: Equip Descrip:  
Actual Location: BAY DOOR  
PM #: Job Plan #:

Assigned To: PEDROA Supervisor: STAUTERLR Craft: METAL

### FINANCIAL INFORMATION

#### For ISD Use Only

JON: CLM1



#### For SSC Use Only



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

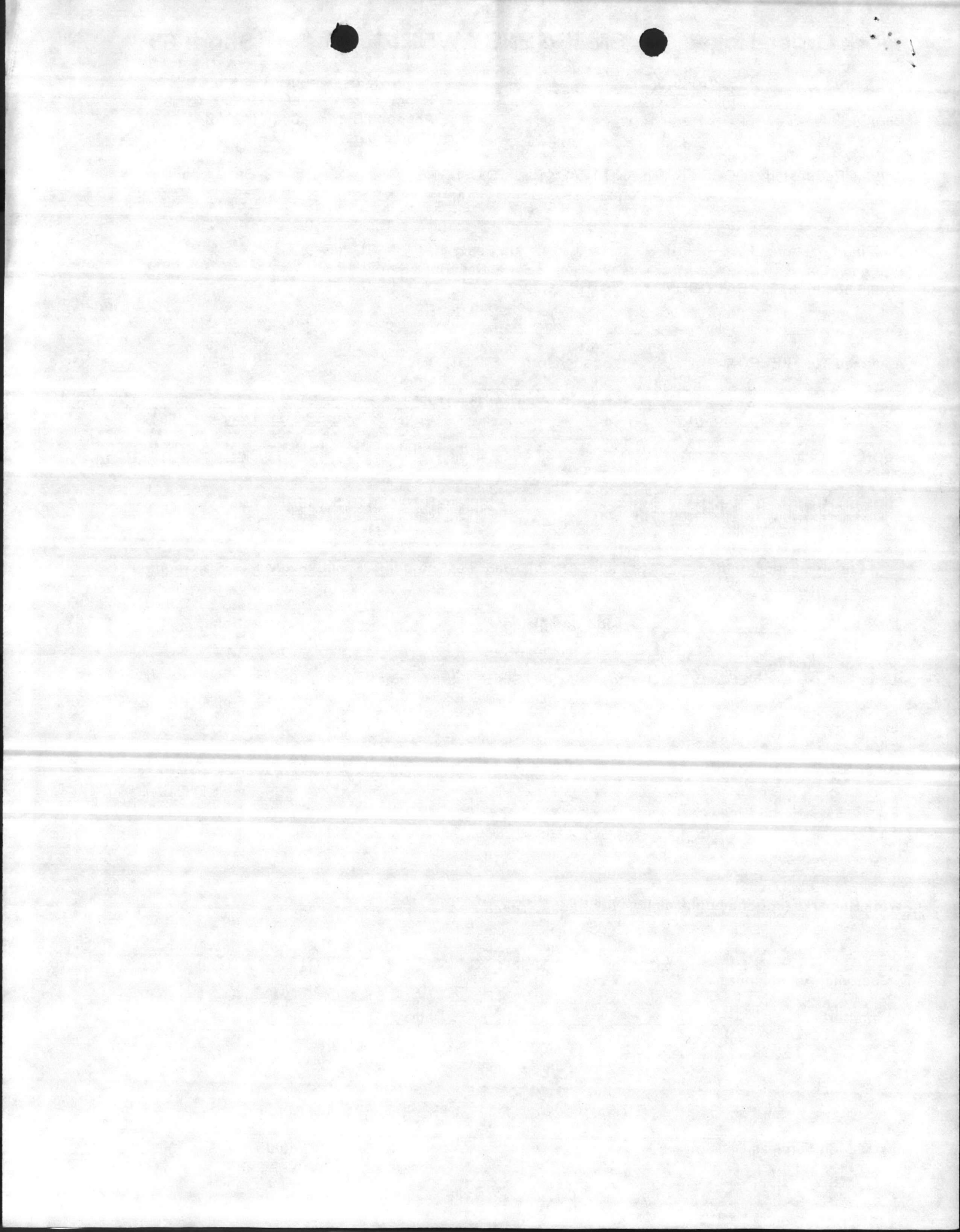
Job Started: \_\_\_\_\_ Job Completed: \_\_\_\_\_ Units: \_\_\_\_\_

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

Work Remarks (continue on back if needed): \_\_\_\_\_

Customer Acceptance:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Work Order Ticket      ROUTINE SERVICE

# Shop: 41

Work Order: 02-175265  
POC: CPL ROBERTS  
Phone: 451-2171/0722  
Entered By: JOHNSONAD

Status: INPRG  
Report Date: 06-SEP-2002 08:28 AM  
Respond By: 20-SEP-2002 08:28 AM  
Target Comp Date:

Service Requested: REBRICK DOOR OPENING  
No additional information available.

Building/Location: 438      Bldg Descrip: GEN STG A/G/ORG  
Equipment #:      Equip Descrip:  
Actual Location: BAY DOOR  
PM #:      Job Plan #:

Assigned To:      Supervisor: AUTRYCA      Craft: MASON

### FINANCIAL INFORMATION

#### For ISD Use Only

JON: CLM1



#### For SSC Use Only



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

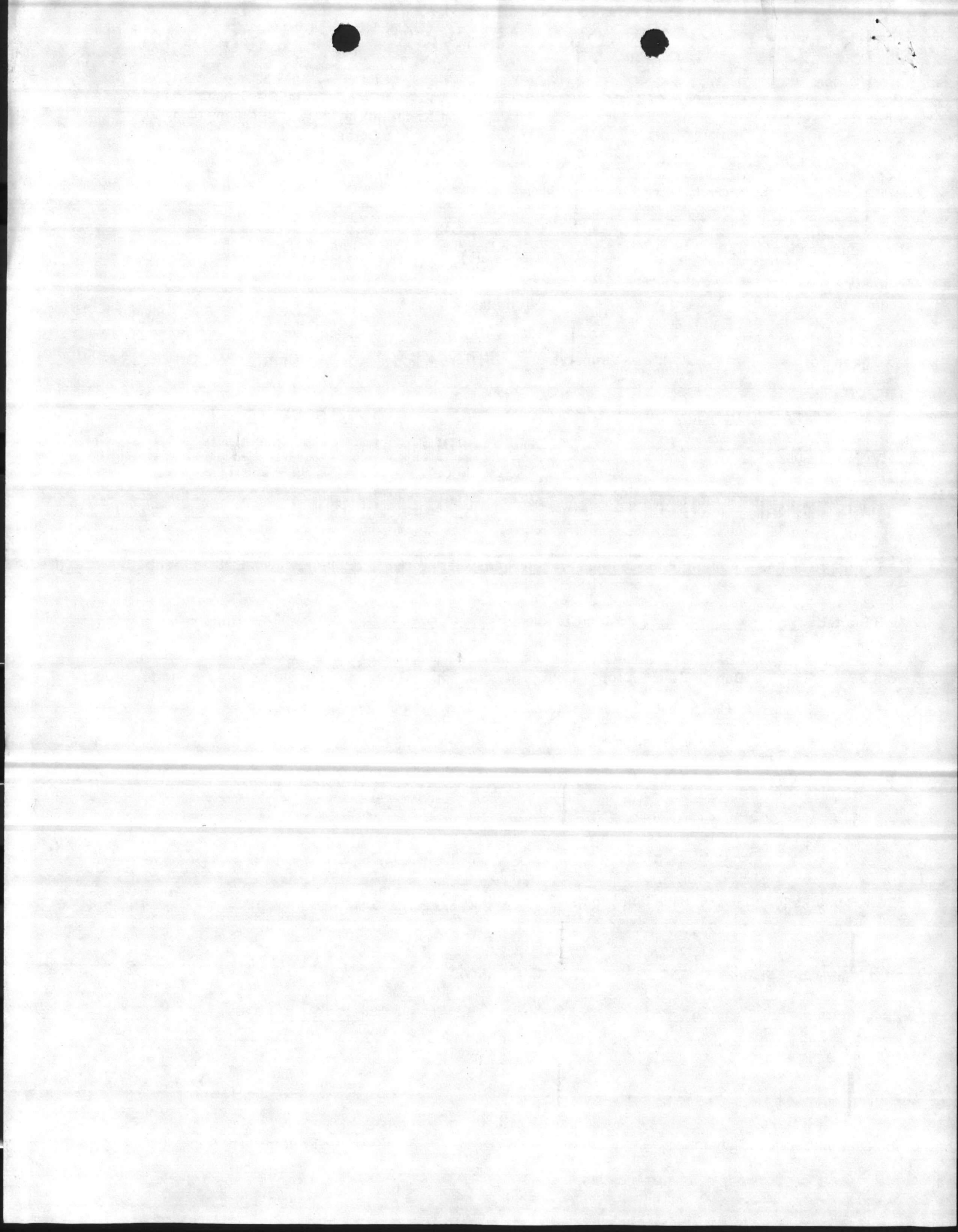
Job Started: \_\_\_\_\_ Job Completed: \_\_\_\_\_ Units: \_\_\_\_\_

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

Work Remarks (continue on back if needed): \_\_\_\_\_

Customer Acceptance:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



UNITED STATES MARINE CORPS  
MARINE CORPS BASE  
PSC BOX 20004  
CAMP LEJEUNE, NORTH CAROLINA 28542-0004

4280  
MAIN  
25 Sep 00

"Comp"  
716

MEMORANDUM

From: Base Maintenance Officer, Marine Corps Base, Camp Lejeune  
To: Public Works Officer, Marine Corps Base, Camp Lejeune

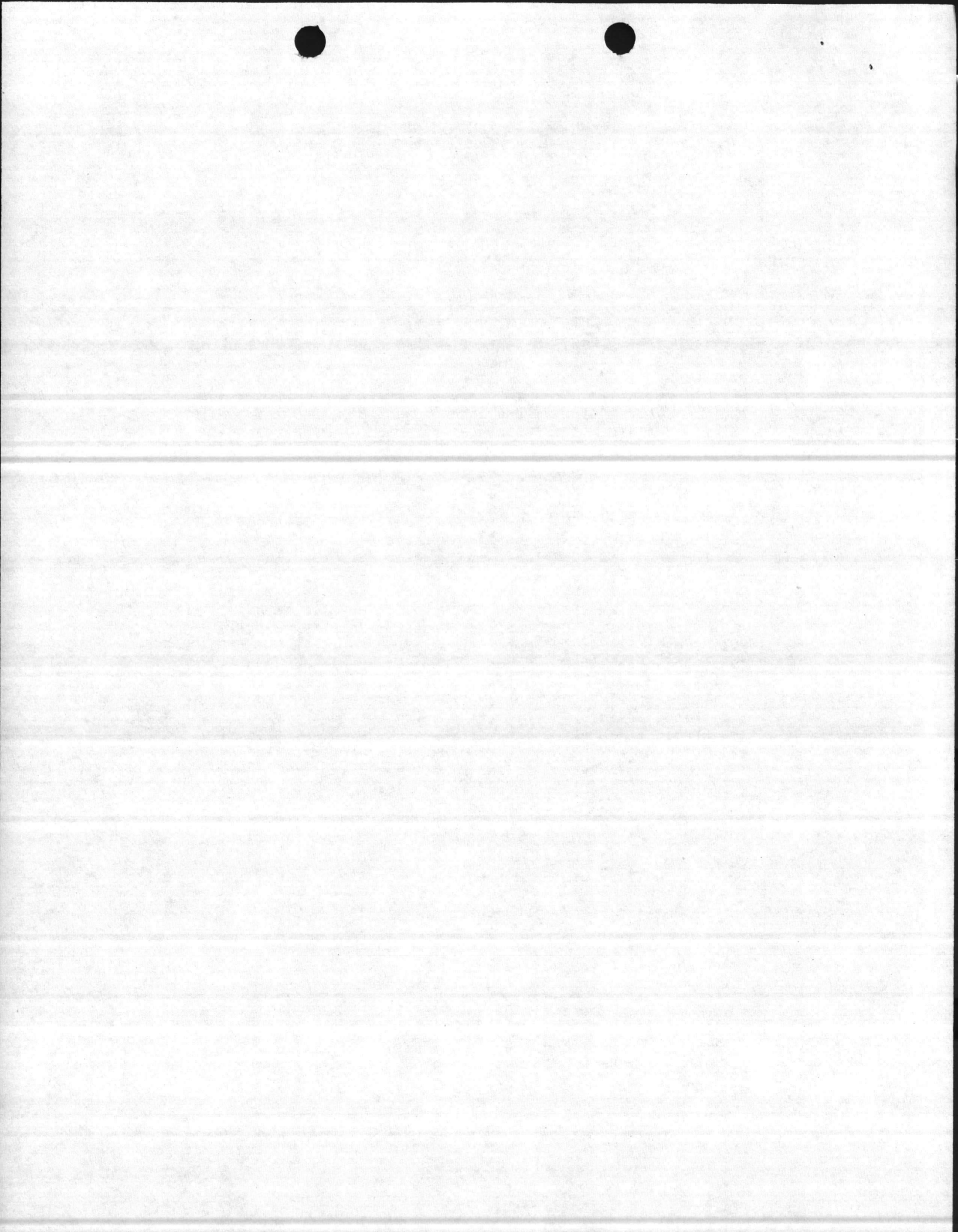
Subj: FY 2001 M1 PROJECTS

- Encl: (1) Project #1M044CN, Miscellaneous Repairs, AS4012  
(2) Project #1M045CN, Replace Reefer Doors Various Messhalls  
(3) Project #1M046CN, Berm Around STT32 Lift Station  
(4) Project #1M047CN, Sidewalk from Bldg 1 to Bldg 17  
(5) Project #1M048CN, Restripe Runaways/Taxiways  
(6) Project #1M049CN, Interior/Exterior Repairs, BB-38  
(7) Project #1M050CN, Interior Repairs/Paint, Bldg 50  
(8) Project #1M051CN, Interior/Exterior Repairs, Bldg 235  
(9) Project #1M052CN, Interior/Exterior Repairs, Bldg FC301  
(10) Project #1M053CN, Interior/Exterior Repairs, Bldg FC302  
(11) Project #1M054CN, Interior/Exterior Repairs, Bldg 233  
(12) Project #1M055CN, Interior/Exterior Repairs, Bldg 438  
(13) Project #1M056CN, Interior/Exterior Repairs, Bldg 1407  
(14) Project #1M057CN, Interior/Exterior Repairs, Bldg 302/302A  
(15) Project #1M058CN, Interior/Exterior Repairs, Bldg 61  
(16) Project #1M059CN, Interior/Exterior Repairs, Bldg 26  
(17) Project #1M060CN, Interior/Exterior Repairs, Bldg 1410  
(18) Project #1M061CN, Electrical/Structural Repairs, Bldg 56  
(19) Project #1M062CN, Interior/Exterior Repairs, Bldg H-22  
(20) Project #1M063CN, Interior/Exterior Repairs, Bldg H-36  
(21) Project #1M064CN, Boiler Plant Repairs, AS4151  
(22) Project #1M065CN, Interior/Exterior Repairs, Bldg 728

1. The enclosures are forwarded for design and possible award in FY 2001.
2. Priorities will be assigned after 1 October 2000.
3. Point of contact is Greg Shoemaker at 451-5796.

E. W. WINBERRY  
Director, Operations Branch

Blind copy to:  
→ Work Recpt.  
Contracts



1055cn

NAVFAC 11013/7(1-78) | COST EST | DATE PREPARED SEPT-20-00 | SHEET OF

ACTIVITY AND LOCATION | CONSTRUCTION AND CONTRACT NO. | IDENTIFICATION NUMBER

MCB CL BUILDING # 438 | |

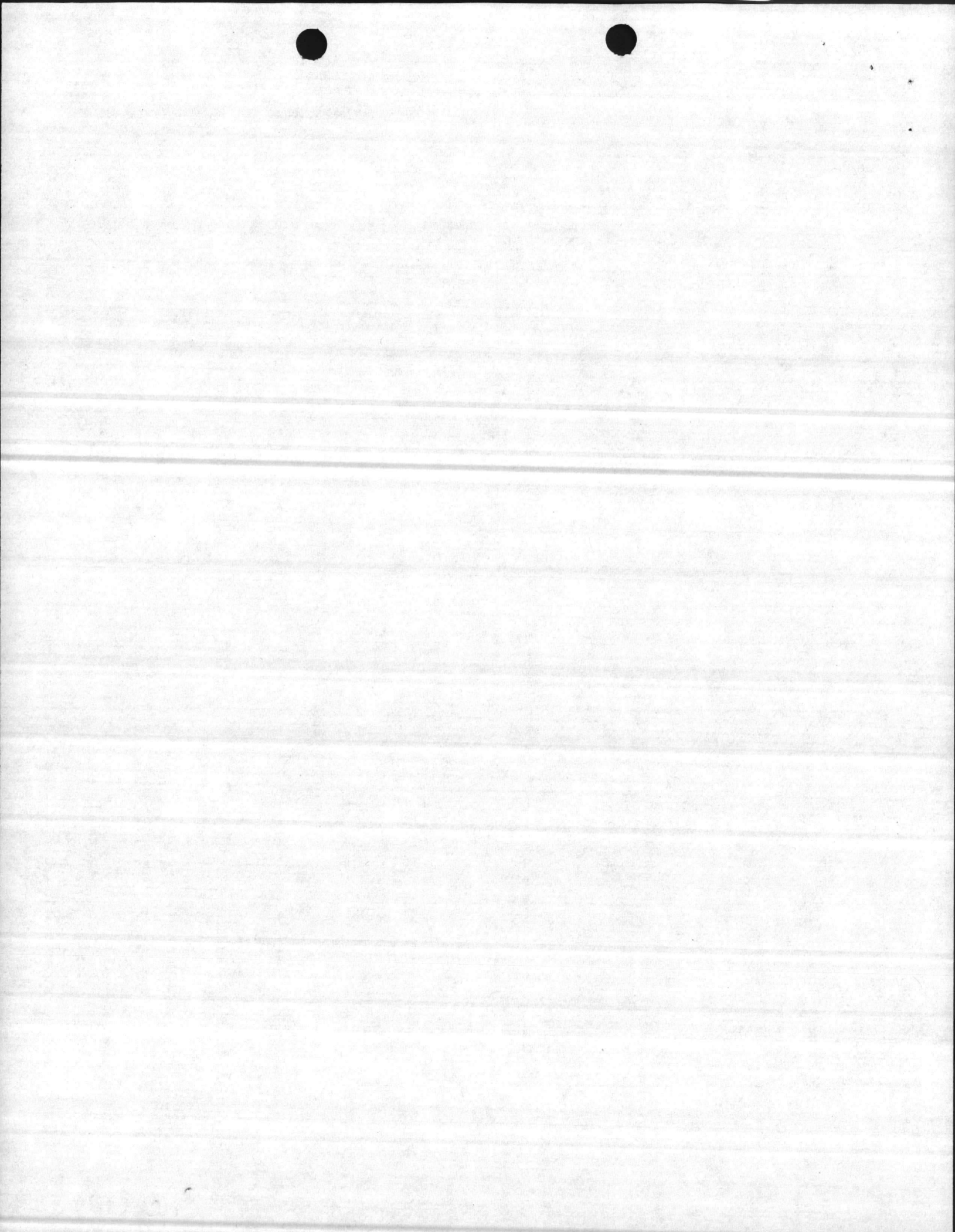
PROJECT TITLE | ESTIMATED BY: ALLEN C. MERCER | CATEGORY CODE NUMBER

INTERIOR AND EXTERIOR REPAIR | JIM ORENGIA, MAJOR PARKER |

ITEM DESCRIPTION	QUANTITY		MATERIAL COST		LABOR COST		ENGINEERING ESTIMATE	
	NUMBER	UNIT	UNIT COST	TOTAL	UNIT COST	TOTAL	UNIT COST	TOTAL
MECHANICAL				23136.00		12848.00		35984.00
ELECTRICAL				18976.00		32459.00		51435.00
STRUCTURAL				12504.00		15807.00		28311.00
SUBTOTAL				54616.00		61114.00		115730.00
OVERHEAD 15%								17359.50
TAXES, FICA, INSURANCE 18% OF LABOR COST								11000.52
NC STATE SALES TAX 6% OF MATERIAL								3276.96
SUBTOTAL								147366.98
PROFIT 10%								14736.70
SUBTOTAL								162103.68
BOND 1%								1621.04
SUBTOTAL								163724.71
CONTINGENCY 10%								16372.47
TOTAL CONTRACT ESTIMATE								180097.19

SAY \$180,000

Encl(12)





ACTIVITY AND LOCATION

CONSTRUCTION AND CONTRACT NO.

IDENTIFICATION NUMBER

MCB CL BUILDING # 438

PROJECT TITLE

ESTIMATED BY: ALLEN C. MERCER

CATEGORY CODE NUMBER

INTERIOR AND EXTERIOR REPAIR

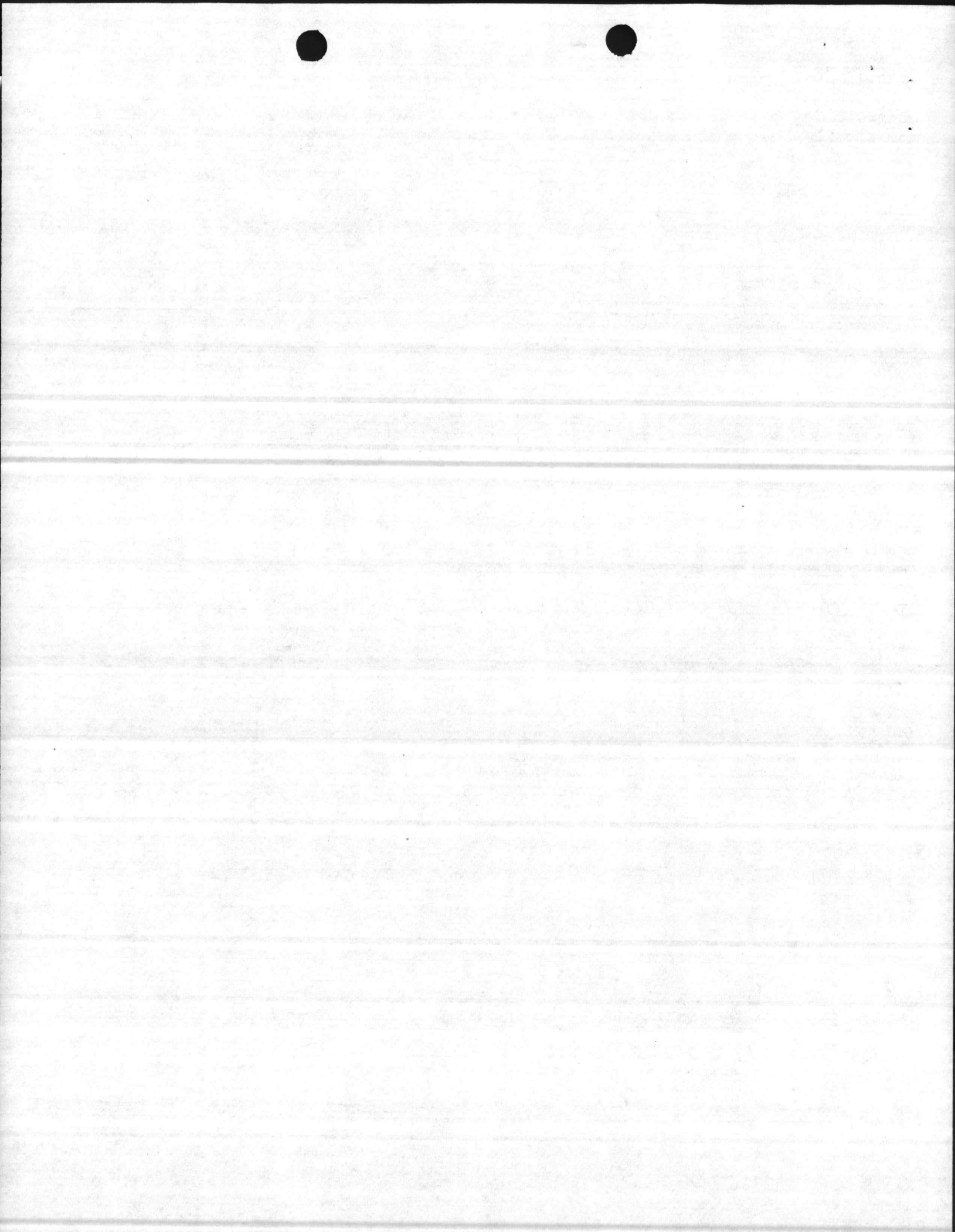
JIM ORENGIA, MAJOR PARKER

ITEM DESCRIPTION	QUANTITY		MATERIAL COST		LABOR COST		ENGINEERING ESTIMATE	
	NUMBER	UNIT	UNIT COST	TOTAL	UNIT COST	TOTAL	UNIT COST	TOTAL
DEMOLISH HEATING AND A/C UNITS THROUGH OUT BLDG. STRUCTURE.	1	TON			520.00	520.00	520.00	520.00
DEMOLISH ALL DRAINAGE, WASTE, VENT, AND WATER SUPPLY PIPING TO 5' OUTSIDE BLDG. STRUCTURE.								
SAMPLE AND TEST FOR ACBM AND ABATE ACCORDINGLY.	1	LOT			4000.00	4000.00	4000.00	4000.00
REPLACE HEATING AND AC SYSTEM WITH HEAT PUMPS FOR EACH SECTION OF BUILDING. PROVIDE AND INSTALL INSULATED DUCT AS REQUIRED FOR USE OF BLDG. PROVIDE REGISTERS AND GRILLS FOR ALL BUILDING SECTIONS. PROVIDE NECESSARY WIRING AND CONTROLS FOR ALL HEAT & A/C UNITS.	2	EA	9425.00	18850.00	2400.00	4800.00	11825.00	23650.00
PROVIDE AND INSTALL MALE AND FEMALE HEAD FACILITIES WITH A HANDICAP PROVISION. PROVIDE ALL DRAINAGE, WASTE , VENT, AND INSULATED WATER SUPPLY PIPING. PROVIDE ALL VALVES, FIXTURES AND FLOOR DRAINS FOR EACH HEAD FACILITY.	2	EA	1593.00	3186.00	1657.00	3314.00	3250.00	6500.00
PROVIDE AND INSTALL WATER FOUNTAIN AND DRAIN TO BE ACCESSIBLE TO ALL SECTIONS OF FACILITY.	1	EA	1100.00	1100.00	214.00	214.00	1314.00	1314.00

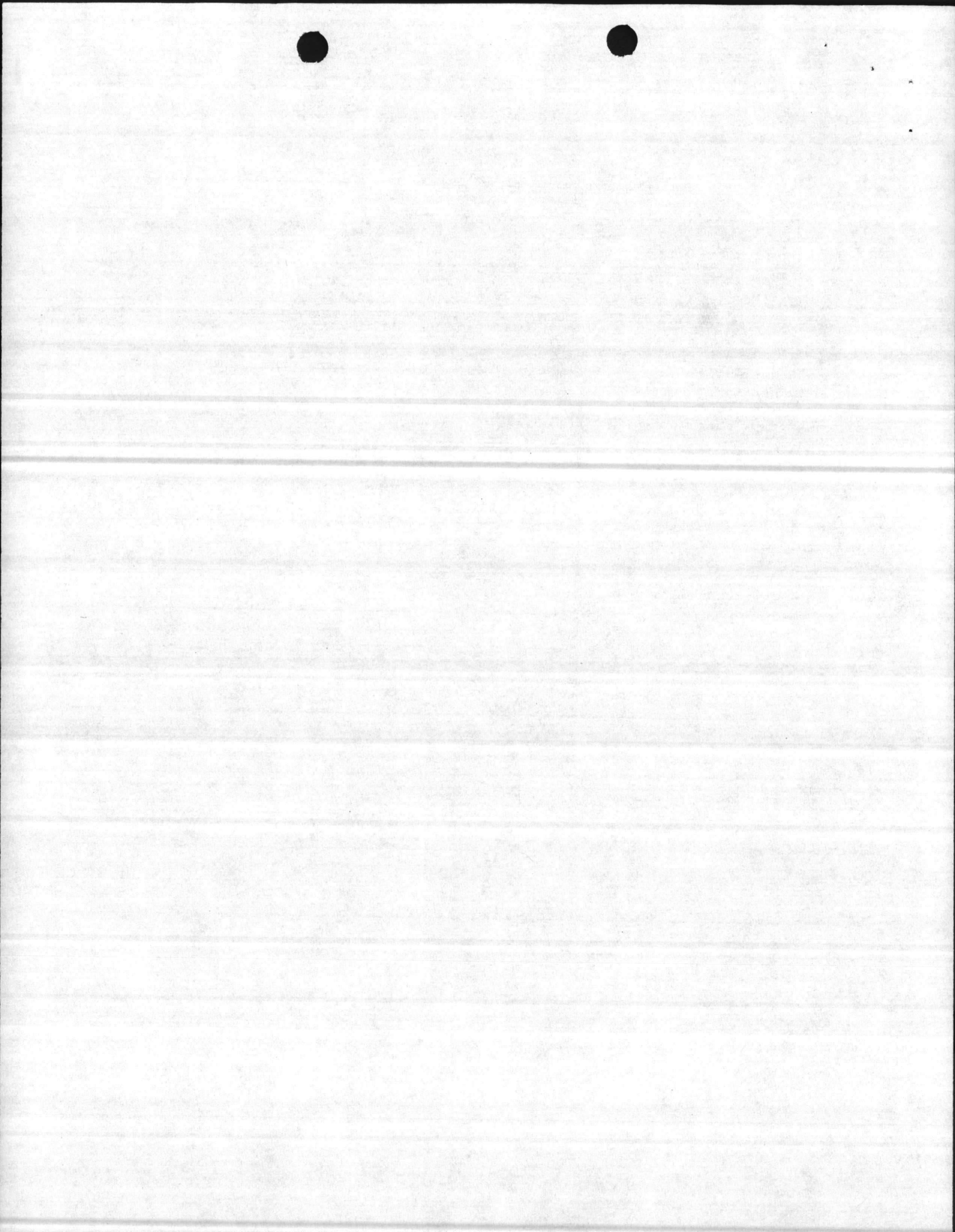
23136.00

12848.00

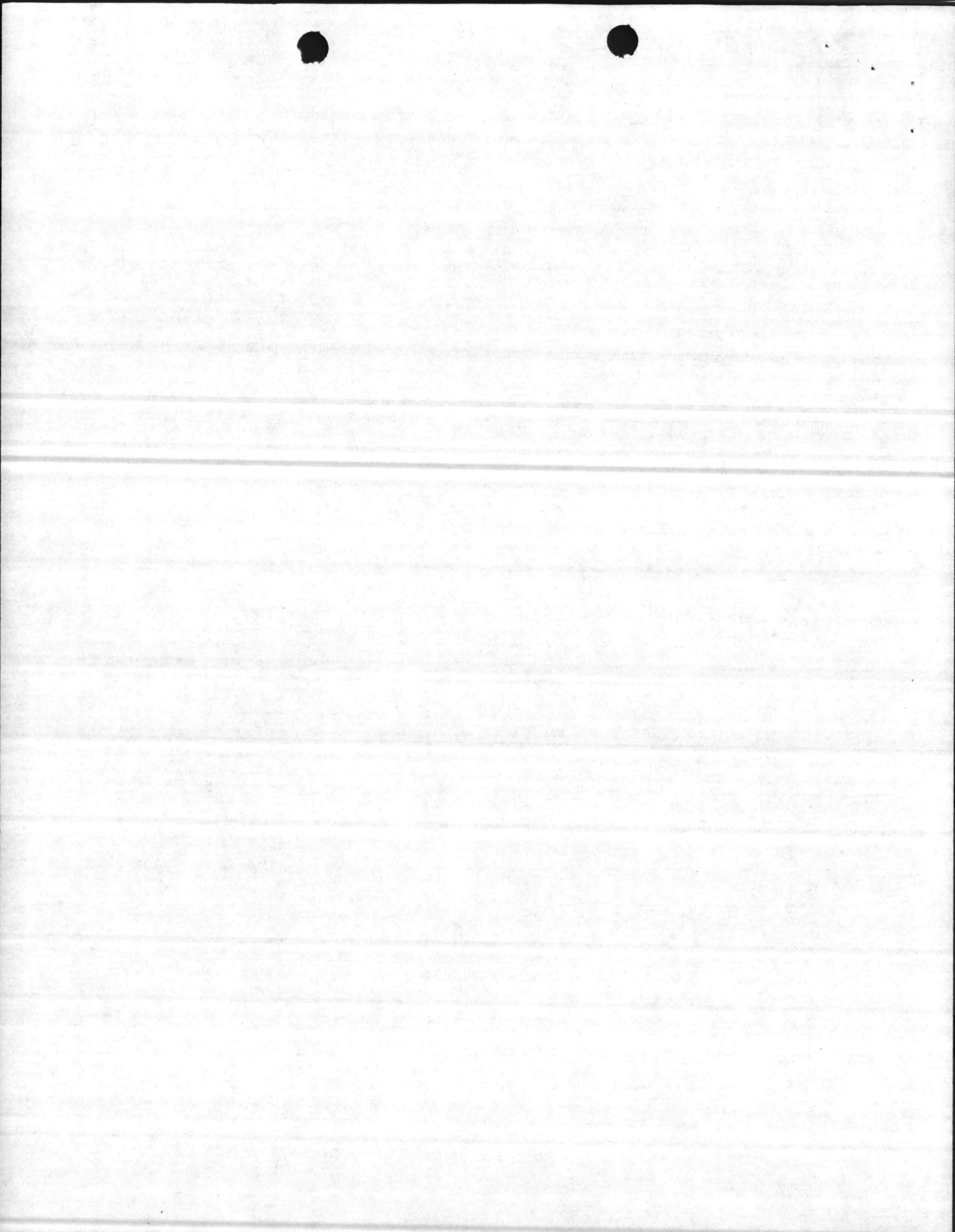
35984.00











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DESCRIPTION:

Contract Data

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J.o. Pending



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