WORK AUTHORIZATION/ESTIMATE (MAINTENANCE MANAGEMENT)
NAVFAC 11014/22 (10-74) S/N 0105-LF-002-7110
Supersedes NAVDOCKS 2353 and 2356

Instructions for completing form are contained in NAVFAC MO-321

3. JOB ORDER NO. 70815

1. ACTIVITY Facilities Management Department Naval Hospital, Camp Lejeune, NC

2. ACTIVITY CODE 0780930

4. ESTIMATE NO.

5. REQUESTED STARTING DATE

6. PRIORITY

7. INSPECTION GENERATED [X] YES [ ] NO

8. FACILITY NO. NH-115

9. EQUIPMENT NO.

10. RPI CAT CODE

11. COST ACCOUNT CODE M1-7120

12.

13.

14.

15. NAVY ACCOUNTING DATA

a. APPROPRIATION SYMBOL AND SUBHEAD	b. OBJECT CLASS	c. BUREAU CONTROL NUMBER	d. AUTH. ACCOUNTING ACTIVITY	e. TRANS CODE	f. PROPERTY ACCTG. ACTIVITY	g. COST CODE
9770130.188E		680930			68093	

16. FOR FURTHER INFORMATION CALL *(Name and telephone)*

17. SKETCH/PLAN ATTACHED IF "YES" INDICATE NUMBER [X] YES TWO [ ] NO

18. LABOR CLASS CODE *(Except for overhead)* 07

19. JOB TITLE
INSTALL FIRE SPRINKLER, NH-115

20. GENERAL JOB DESCRIPTION
INSTALL ONE EACH 212° PENDANT STYLE SPRINKLER IN METAL CHAIR STORAGE, LOCATED NEXT TO POMI STOREAGE, IN BLDG NH-115. TIE INTO EXISTING SYSTEM. NOTIFY FIRE DEPARTMENT WHEN WORK IS COMPLETE FOR RE-INSPECTION AT EXT. 1-3220/2548.

21. ESTIMATE

a. BREAKDOWN OF WORK				b. SUMMARY OF ESTIMATE				
JOB PHASE NO. (1)	WORK CENTER (2)	DESCRIPTION (3)	EST. HOURS (4)	WORK CENTER (5)	LABOR HOURS (6)	LABOR (7)	MATERIAL (8)	TOTAL ESTIMATE (9)
	34	As above	21	34	21	546	150	696
		Cancelled						
		Forces Ashore Repaired Roof						
		to Have a wire Support						
				TOTAL	21	546	150	696
				c. CONTINGENCY				
				d. OVERHEAD AND/OR SURCHARGE				
				e. GRAND TOTAL				696

22. DISTRIBUTION

MCD							
ADP							
MAINT							

23. AUTHORIZED WORK TO BE PERFORMED *(Signature)* K. J. BARTOE, LTJG, CEC, USN

TITLE Head, Facilities Management Dept.

DATE 09 Dec 96

B-9379

CAMP LEJEUNE FIRE PROTECTION DIVISION
FIRE INSPECTORS REPORT

DATE: 11/25/1996
TYPE: HAZARD

BUILDING: NH115
ACTIVITY: NAVAL REGIONAL MEDICAL CENTER
INSPECTION DATE: 11/25/1996
ACCOMPANIED BY: HN COLSON
ACCOMPANIED PHONE #: 910-451-4903

Hazard: 001 Time: 17:15 Code: P1L

DSC: SPRINKLER SYSTEM NOT PROVIDED WHERE IT IS REQUIRED. SEE Specific #70815
LOC: STORAGE CAGE TOP BLOCKS SPRINKLER
REF: MCO P11000.11A, 0602
REC: SUBMIT A REQUEST TO HAVE A SPRINKLER SYSTEM INSTALLED.

Hazard: 002 Time: 17:15 Code: G1R

DSC: FIRE LANES NOT BEING MAINTAINED IN WAREHOUSE AREAS
LOC: STORAGE AREA NEXT TO ARCHIVES HAS NO LANES
REF: BO11320.1H SECT. 1 PARA. F
REC: MAINTAIN UNOBSTRUCTED FIRE LANES THROUGHOUT WAREHOUSE AREA

OP MAN
CARPET for
BEQ(NH 120)

Hazard: 003 Time: 17:15 Code: H1D

DSC: COMBUSTIBLE TRASH AND DEBRIS WITHIN CLOSE PROXIMITY OF BLDG.
LOC: OUTSIDE OF BUILDING, PALLETS AND OLD PLATFORM
REF: MCO P11000.11A, 0901.2
REC: REMOVE ITEMS FROM AROUND BUILDING TO DISTANCE OF 15 FEET.

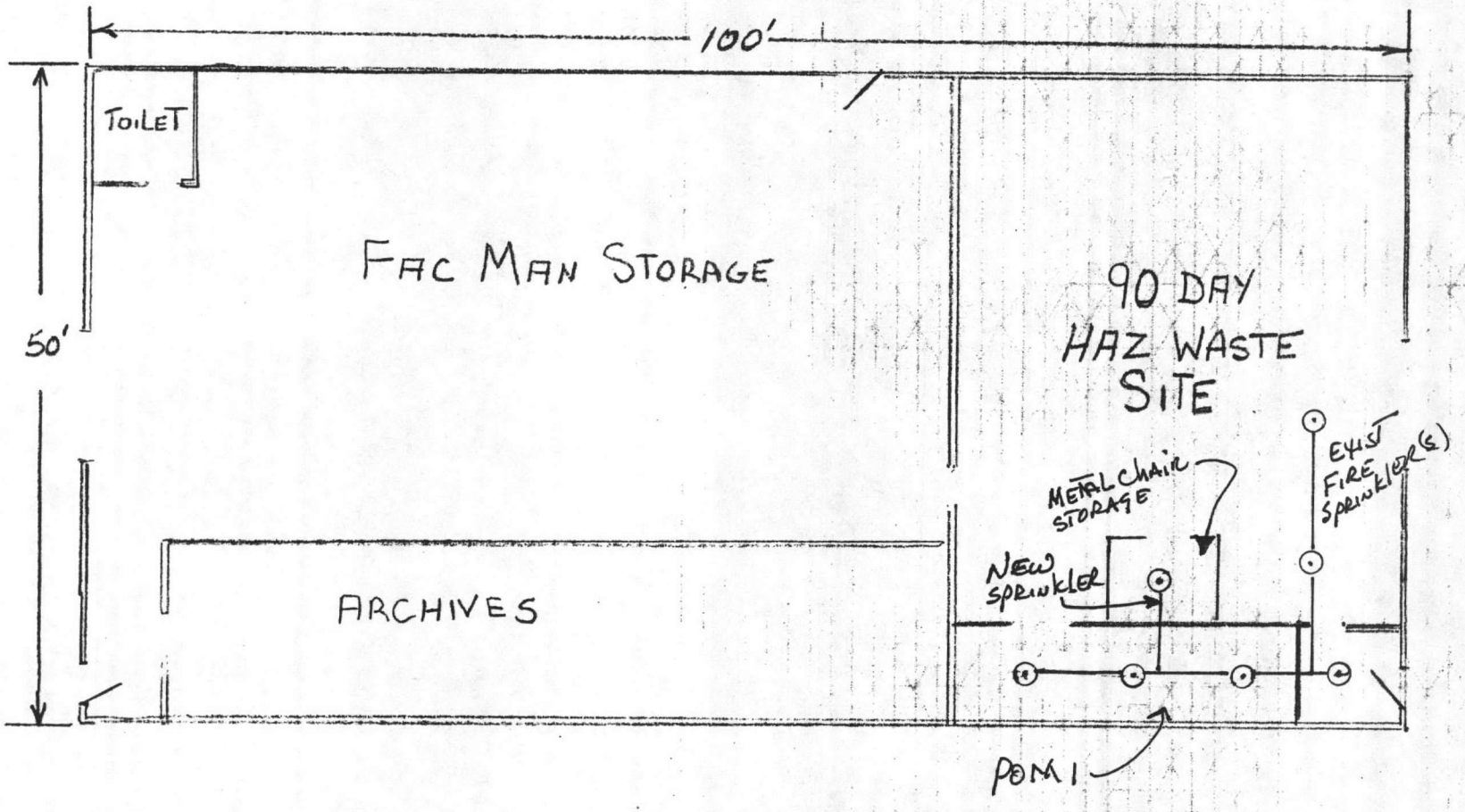
Hazard: 004 Time: 17:15 Code: P5P

DSC: NOTE: WITHIN 5 DAYS INDICATE ACTION TAKEN & RECORD ALL W/O # ON REPORT OR ON ATTACHED PAPER. DEFICIENCIES TO BE CORRECTED WITHIN 30 DAYS.
LOC:
REF: BO 11320.1H 6D REQUIRES "IMMEDIATE ATTENTION" TO A FIRE INSP. REPORT
REC: RETURN REPORT TO NEAREST FIRE STA. OR FIRE HQ. BLDG. 18 MAIN SERVICE ROAD OR MAIL TO CLFD FIRE PREVENTION SECTION GUARD MAIL STOP 21
******* P.O.C. MAY BE REACHED AT TEL# 3320/2548 OR FAX 5976 ********

INSPECTOR: [signature]
PENUEL
910-451-2132

RECEIVED BY: [signature]
WETLAND, KENNETH
___-___-4692
12-05-96

Specific 70815



PROVIDE (1EA) 212° PENDANT TYPE SPRINKLER W/RELATED PIPING SIZE PIPE TO MATCH EXISTING PIPE.

FLOOR PLAN NH 115