#### UNITED STATES MARINE CORPS



MARINE CORPS INSTALLATIONS NATIONAL CAPITAL REGION
MARINE CORPS BASE QUANTICO
3250 CATLIN AVENUE
QUANTICO, VA 22134-5001

IN REPLY REFER TO: 10110 B214 23 Jan 17

## BASE FOOD SERVICE MEMORANDUM 10-17:

From: Food Service Officer, Food Service Branch, G-4 Logistics

To: District Manager, Sodexo Inc., Quantico

Subj: BASE FOOD SERVICE MAINTENANCE REPORTING PROCEDURES FOR

DWYER HALL

Ref: (a) Regional Garrison Food Service Contract

M00027-11-C-0003

Encl: (1) Work Request Example

- 1. Per the reference, the Government will be responsible for the maintenance of mess hall facilities, which includes repairs to facility fixtures, including plumbing fixtures, light fixtures, repairing leaky faucets, toilets, and replacing burnt out light bulbs. The Contractor shall promptly notify the Government whenever the Contractor sees that a facilities maintenance task is required. The Contractor shall attempt to unclog any clogged toilet, sink or drain, with a plunger (plumber's helper) before requesting assistance from the Government.
- 2. All work orders will be called in Monday-Friday between the hours of 0730 and 1630. Please use the following procedure when reporting work orders:
- a. Fill out form NAVFAV 9-11014/20 REV.2/94 (which is located on the Base food Service web page) <a href="http://www.quantico.marines.mil/OfficesSaff/G4Logistics/FoodServicesBranch.aspx">http://www.quantico.marines.mil/OfficesSaff/G4Logistics/FoodServicesBranch.aspx</a>, then submit via email to mccdc fdsvc maintreq@usmc.mil.
- (1) Instruction on filling out and submitting NAVFAV 9-11014/20 REV.2/94.

Block 1 - GM name and building number.

Block 2 - The request number (provided by Base Food Service) BFS once submitted to Facility Maintenance (FM).

Block 3 - MCAF Facilities.

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Block 4 - Date of request

Block 5 - X in "Performance of Work" box.

Block 6 - GM's Point of Contact information.

Block 7 - X in "Yes" "No" box if applicable.

Block 8 - Detail description of the of item required to be repaired or replace. Provide exact location of item.

Block 9 - N/A.

Block 10 - GM print full name and sign document.

- (2) Submit completed work request to email provided in paragraph (1).
- b. Once the requested repairs have been completed by MCAF Facilities, the Sodexo Management Team is required to do the following:
- (1) Have Maintenance Tech sign the "Work Order Complete" log book.
- (2) Make a copy of the Maintenance Tech's work order and file in maintenance book.
- 3. Emergency work orders (i.e. power, steam, water or electric outage) that occur during the weekends, holidays and hours from 1630 to 0730 will be called in immediately to Marine Corps Air facility (MCAF) Quantico Command Duty Officer (CDO) at (703) 675-3623 or by email at MCAF CDO.fct@usmc.mil and a curtesy copy will be sent to mccdc fdsvc maintreq@usmc.mil by the General Manager (GM). The GM will also notify the District Manager (DM) or TR. The GM will follow up with NAVFAV 9-11014/20REV.2-68)S/N0105-LF-002-7510 form and submit per paragraph (1).
  - a. District Manager can be reached at (540)623-4522.
- b. The GM is the primary point of contact for all work orders.
- 4. At the end of the month the Sodexo Management Team will ensure that the following items are filed in the Maintenance Book under the correct month:
  - a. Master Monthly Maintenance Log.

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- b. A copy of the "Work Order Complete" log book.
- c. Reconciliation will be conducted on the 8<sup>th</sup> day of the following month. If the 8<sup>th</sup> falls on a weekend, reconciliation will be conducted on the business day prior. Matching completed work orders for both Base Food Service and Sodexo.
- 5. The point of contact is MSgt Osborne (703) 784-2491.

 $\int_{J.W.GLINSKY}$ 

Copy to:
District Manager
Technical Representative
Mess Hall 2123
QAE
File

# WORK REQUEST (MAINTENANCE MANAGEMENT) NAVFAC 9-11014/20 (REV. 2/94 (EF)) (New S/N number pending)

| Requestor see instructions on Reverse Side                                                |                                              |                                      |
|-------------------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------|
| PART 1REQUEST (Filled out by Requestor)                                                   |                                              |                                      |
| 1. FROM                                                                                   |                                              | 2. REQUEST NO.                       |
| з. то<br>MCAF Fac                                                                         | ilities                                      | 4. DATE OF REQUEST                   |
| 5. REQUEST FOR COST ESTIMATE                                                              | PERFORMANCE OF WORK                          | 5a. REQUEST WORK START               |
| 6. FOR FURTHER INFORMATION CALL                                                           |                                              | 7. SKETCH/PLAN ATTACHED YES NO       |
| 8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.) |                                              |                                      |
|                                                                                           |                                              |                                      |
|                                                                                           |                                              |                                      |
|                                                                                           | •                                            |                                      |
| 9. FUNDS CHARGEABLE                                                                       | 10. SIGNATURE (Requesting Off                | icial)                               |
| PART IICOST ESTIMATE                                                                      |                                              |                                      |
| (Filled out by Maintenance Control Division if estimate requested)                        |                                              |                                      |
| . 11. TO 12. ESTIMATE NO.                                                                 |                                              |                                      |
| 13. COST ESTIMATE                                                                         | 14. SKETCH/PLAN ATTACHED YES                 | NO                                   |
| a. Labor                                                                                  | 15.  APPROVED PROGRAMMING TO START IN        | V                                    |
| b. Material                                                                               | APPROVED PROGRAMMING TO START IN             | ٧                                    |
| C, Overhead and/or Surcharge                                                              | PROGRAMMING TO START IN                      | ٧, IF                                |
| d. Equipment Rental/Usage                                                                 | AUTHORIZED BY 25TH OF<br>ARE MADE AVAILABLE. | AND FUNDS                            |
| e. Contingency                                                                            | DISAPPROVED. (See Reverse Side)              |                                      |
| 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 P NAVCOMPT 140          |                                              | HAS BEEN WILL BE PERFORMED BY OTHERS |
| 21. SIGNATURE                                                                             | 22. DATE                                     |                                      |
| (See Part IV on Reverse Side)                                                             |                                              |                                      |

### INSTRUCTIONS

### IF ESTIMATE IS DESIRED BEFORE WORK IS STARTED

Requestor fills in all items in Part I checks "Cost Estimate" in Item 5, attaches sketch or plan II necessary, checks proper block in Item 7. Requestor retains last copy and forwards balance to Public Works Department.

If the Work Request is approved, the original and first copy will be returned to the requestor with Part II completed. If the requestor desires the work to proceed in accordance with the estimate provided, he should fill in Part III, checking proper block in item 19 and attaching the document citing the funds to be used. If the requestor decides not to authorize the work, the appropriate hox in item 20 should be checked. The original form, in either case, is returned to the Public Works Department.

If the Work Request is disapproved, the reasons for disapproval will be stated in Part IV, signed by the Public Works Officer, and the original and one copy returned to the requestor

# IF ESTIMATE IS <u>NOT</u> DESIRED BEFORE WORK IS STARTED AND FUNDS ARE NOT UNDER COGNIZANCE OF PWO

Requestor fills in all items in Parts I and III except item 20, checks "Performance of Work" in Item 5, attaches sketch or plan if necessary, checks proper block in item 7, checks proper block in Item 19, and attaches document citing the funds to be used. Requestor retains last copy and forwards balance to Public Works Department.

If the Work Request is approved, the first copy will be returned to the requestor with items 11, 12, 15, 15\6, and 17 of Part II completed.

If the Work Request is disapproved, the reasons for disapproval will be stated in Part IV. signed by the Public Works Officer, and the original and one copy returned to requestor.

# IF ESTIMATE IS NOT DESIRED BEFORE WORK IS STARTED AND FUNDS ARE UNDER COGNIZANCE OF PWO

Requestor fills in all items in Parts I, checks "Performance of Work" in item 5, attaches sketch or plan if necessary, checks proper block in item 7. Requestor retains last copy and forwards balance to the Public Works Department.

If the Work Request is approved, the first copy will be returned to the requestor with items 11, 12, 15 as applicable, 16 and 17 of Part II completed.

If the Work Request is disapproved , the reasons for disapproved will be stated in Part IV, signed by the Public Works Officer, and the original and one copy returned to requestor.

PART IIV---REMARKS